

425-2

5-192a

BRIEF.

APPLICATION OF

*Joseph Henry Panner*

FOR THE ENROLLMENT OF

*Self*

IN THE INDIAN SCHOOL AT

*Carlisle, Pa*

NAME OF AGENCY FROM WHICH PUPIL CAME:

Date of enrollment, \_\_\_\_\_, 191

Term of enrollment, \_\_\_\_\_ (\_\_\_\_\_) years.

NAME OF PERSON ARRANGING FOR THE TRANSFER:

Position, \_\_\_\_\_

## APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

(For a child enrolled at an Agency.)

For and in consideration of the Government of the United States assuming the care, education, and maintenance in the United States Indian School at Carlisle, Pa.

of Joseph Henry Runner ; m ; age 21 ; date of birth Apr. 1893 ;  
 (Name of child.) (Sex.)  
 (Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING, OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Henry Runner</u>	<u>Living</u>	<u>Piegau</u>		<u>Full</u>
NAME OF MOTHER.				
<u>Mrs. Henry Runner</u>	<u>"</u>	<u>"</u>		<u>Full</u>

I, Joseph Henry Runner, do hereby voluntarily consent and agree to  
 (Parent, guardian, or next of kin.)  
 enrollment in said school for a period of three years, and also obligate myself to abide by  
 (Not less than 3.)  
 all the rules and regulations for Indian schools.

The said child has been enrolled in the following schools:

NAME OF SCHOOL.	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE.	GRADE.
1. <u>At Shan</u>	<u>1906</u>	<u>1910</u>	<u>School abolished</u>	<u>H. H.</u>
2.				
3.				
4.				

Joseph Henry Runner  
 (Parent, guardian, or next of kin.)

P. O. address: Browning  
Montana

Two witnesses:

A. E. McFadden



### PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find \_\_\_\_\_ to be in proper physical condition to attend school, and not afflicted with tuberculosis or any disease which would be a menace to the health of other pupils.

This 8th day of March, 1914

S. Reilly

Physician at Browning Agency.

### CERTIFICATE OF AGENT OR BONDED SUPERINTENDENT.

I hereby certify that the statements made in the foregoing application and certificate, to the best of my knowledge and belief, are true; that the consent of Joseph Henry Runner was voluntary.  
(Parent, guardian, or next of kin.)

(Here state whether the child lives within reach of a public school, whether the State laws permit it to enroll therein, and if it lives near the public school why it can not attend such school.)

Not near any public school.

I recommend the transfer of the said child.

This 7 day of March, 1914

Arthur E. McGinty

Agent or Superintendent.

### CERTIFICATE OF SCHOOL PHYSICIAN.

I hereby certify that on \_\_\_\_\_, I made a careful examination of the physical condition of \_\_\_\_\_, the child named in the foregoing application, and found \_\_\_\_\_ to be \_\_\_\_\_  
(As soon after arrival as possible.)

I therefore recommend that the said child be \_\_\_\_\_ enrolled in this school.

This \_\_\_\_\_ day of \_\_\_\_\_, 191

School Physician.

### SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a nonreservation school. The Superintendent of the nonreservation school will retain the original for his files, and the duplicate shall be deposited in the reservation school records. The reservation superintendent should send to the Commissioner of Indian Affairs his certificate as provided by law. All the blanks must be properly filled in every case.

If the information called for on any part of the blank is not known, that fact should be stated. No space should be left unfilled. Whether the parents are living or dead, their names must be given.

The person who signs the blank as consenting to the transfer should indicate his relation to the applicant by marking out the word "parent," "guardian," or "next of kin," leaving unmarked only the title appropriate to the signer.



## INDORSEMENTS.

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The laws relating to the transfer of Indian children from reservations and schools are as follows:

That hereafter no Indian child shall be sent from any Indian reservation to a school beyond the State or Territory in which said reservation is situated without the voluntary consent of the father or mother of such child if either of them are living, and if neither of them are living without the voluntary consent of the next of kin of such child. Such consent shall be made before the agent of the reservation, and he shall send to the Commissioner of Indian Affairs his certificate that such consent has been voluntarily given before such child shall be removed from such reservation. And it shall be unlawful for any Indian agent or other employee of the Government to induce, or seek to induce, by withholding rations or by other improper means, the parents or next of kin of any Indian to consent to the removal of any Indian child beyond the limits of any reservation. (28 Stats., p. 906.)

*Provided*, That hereafter no Indian child shall be taken from any school in any State or Territory to a school in any other State against its will or without the written consent of its parents. (29 Stats., p. 348.)

That no Indian pupil under the age of fourteen years shall be transported at Government expense to any Indian school beyond the limits of the State or Territory in which the parents of such child reside or of the adjoining State or Territory. (35 Stat. L., 781.)

The rules provide that—

A pupil who has been regularly enrolled in a nonreservation school must not be taken to any other nonreservation school without the consent of both Superintendents and the Commissioner of Indian Affairs; and superintendents will be held to strict accountability for such pupils taken to their schools.

An Indian boy or girl 18 years old and over may, without the consent of parents or others, personally sign the application form on its being changed to suit the case; but in all cases where the parents are living they should first be consulted.

This form is to be used only in transfers from reservations or Indian schools to nonreservation schools.

# CARLISLE INDIAN INDUSTRIAL SCHOOL

4255

## DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 5176	ENGLISH NAME Joe Heavyrunner	AGENCY Blackfeet	NATION Blackfeet		
BAND	INDIAN NAME	HOME ADDRESS Browning, Mont			
PARENTS LIVING OR DEAD	BLOOD free	AGE 21	HEIGHT 5-9	WEIGHT 149	FORCED INSP.
FATHER,	MOTHER,	SEX. M			
ARRIVED AT SCHOOL Mar. 12, 1914	FOR WHAT PERIOD Three years	DATE DISCHARGED Sept. 30, 1914		CAUSE OF DISCHARGE Desertion	
TO COUNTRY 4-27-13	PATRONS NAME AND ADDRESS Ran				FROM COUNTRY

THE SHAW-WALKER CO., MUSTERON 121071

Months in school before Carlisle, 27

Grade entered at Carlisle,

Grade at date of Discharge,

Trade or Industry,

Church, Catholic

30 miles to public school



# Heavy Runner 29

NAME Joseph Runner (Heavy) Sex Male.  
~~Female.~~

Tribes Full Black feet State Montana Mar. 12, 1914

Age 20 years Respiration 18 Condition of, Eyes Normal

Height 5 ft. 9 ins. Mensuration Insp. 37  
Exp. 34

Weight 141 1/2 lbs. Throat Tonsils very slightly enlarged

Temperature 98 3/5 Vaccination Positive Cervical glands Negative

Pulse 72 Vision Good Skin Good

Inspection Good development

Palpation Negative

Percussion Negative

Auscultation a few rales due to ac. bronchitis

Heart

(Menstruation)

## FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>yes</u>	<u>good health</u>		
Mother	<u>"</u>	<u>"</u>		
Brothers	<u>3</u>	<u>"</u>		
Sisters	<u>2</u>	<u>good health</u>		

Personal history no illness

Present condition Excellent

Walter B. Smith, M. D.

This form is for the record of the physical condition of pupils of boarding or nonreservation Indian schools. It should be filled in by the school physician at the time of the admission of the pupil.

Physicians in the field should use this form to record the examination of pupils for transfer to nonreservation schools. It should accompany the pupils' transfer blanks.

The reverse side is intended as a card-index case-record for use by all Service physicians.

Age ..... Sex { Male. } Tribe { Full } ..... Residence .....  
 { Female. } { 1/ }  
 (On ....., 19....)

6—1955



4253

NAME Joseph Heavy Runner Sex Male  
 Tribe Blackfoot State Montana Date March 12th, 1914  
 Age 20 years Respiration 18 Condition of Eyes Normal  
 Height 5 ft. 9 ins. Mensuration { Insp. 37  
 Weight 141 1/2 lbs. { Exp. 34  
 Temperature 98 3/5 Vaccination Positive  
 Pulse 72 Vision Good  
 Inspection Good development  
 Palpation Negative  
 Percussion "  
 Auscultation A few rales due to ac. bronchitis -  
 Heart   
 (Menstruation)

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>Yes</u>	<u>Good health</u>		
Mother	<u>"</u>	<u>"</u>		
Brothers	<u>3</u>	<u>Good</u>		
Sisters	<u>2</u>	<u>"</u>		

Personal history No illness  
 Present condition Excellent

Walter Rindtloff, M. D.

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The reverse side is intended as a card-index case-record for use by all Service physicians.



Age ..... Sex { Male. } Tribe { Full } ..... Residence .....  
 { Female. } { 1/ }  
 (On ....., 19.....)

6—1955

NAME Joe Heaney. Runner Sex ☒ Male. ☐ Female.  
 Tribe ☒ Full Peyan State Montana March, 19 12  
 Age 21 years Respiration 19 Condition of, Eyes Good  
 Height 5 ft. 9 ins. Mensuration { Insp. \_\_\_\_\_ Ears \_\_\_\_\_  
 Weight 149 lbs. { Exp. \_\_\_\_\_ Throat \_\_\_\_\_  
 Temperature 98 2/5 Vaccination Yes Cervical glands \_\_\_\_\_  
 Pulse 72 Vision \_\_\_\_\_ Skin \_\_\_\_\_  
 Inspection Good  
 Palpation Normal  
 Percussion \_\_\_\_\_

Auscultation \_\_\_\_\_

Heart \_\_\_\_\_

(Menstruation) \_\_\_\_\_

#### FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>Yes</u>			
Mother	<u>"</u>			
Brothers	<u>"</u>			
Sisters	<u>"</u>			

Personal history \_\_\_\_\_

Present condition \_\_\_\_\_

Francis Reilly, M. D.

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Physicians in the field should use this form to record the examination of pupils for transfer to nonreservation schools. It should accompany the pupils' transfer blanks.

The reverse side is intended as a card-index case-record for use by all Service physicians.



Name \_\_\_\_\_

Age \_\_\_\_\_ Sex  $\left\{ \begin{array}{l} \text{Male.} \\ \text{Female.} \end{array} \right.$  Tribe  $\left\{ \begin{array}{l} \text{Full} \\ 1/ \end{array} \right.$  \_\_\_\_\_ Residence \_\_\_\_\_

(On \_\_\_\_\_, 19\_\_\_\_)

19

July 14th, 1914.

Mr. Arthur E. McFatrige,  
Superintendent, The Blackfeet Agency,  
Browning, Mont.

My dear Sir:

At the request of Louis Headley, one of the Arapahoe boys enrolled here from Fort Washakie, Wyoming, this is to advise that when Joe Heavy Runner deserted from this school he took with him Louis's watch and chain. The watch was a present to Louis from his home and so he values it more highly than is represented by the mere cost.

Louis would like to have his watch and chain returned to him in good condition, but if Joe cannot do that he wants to be paid \$20.00, which Louis claims is the value of the articles.

Hoping that you can assist in getting the matter adjusted, I remain,

Very respectfully,

HKM.

Supervisor in Charge.



## CARLISLE INDIAN SCHOOL

[illegible]

Progress from \_\_\_\_\_, \_\_\_\_\_, to \_\_\_\_\_

(Date)

(Date)

FIRST YEAR IN THIS SCHOOL	SEPT.	OCT.	NOV.	DEC.	JAN.	FEB.	MAR.	APR.
Class or grade.....								
Academic.....standing*								
Industrial.....standing* (Department)								
Musical: Band.....standing*								
Vocal.....standing*								
Orchestra.....standing*								
Department.....standing*								
Physical condition.....								

Remarks: \_\_\_\_\_

PRESENT NAME

Joseph Heavy Runner



19

June 30th, 1914.

Mr. Arthur E. McFatriage,  
Superintendent, The Blackfeet Agency,  
Browning, Mont.

My dear Sir:

This is to report that Joe Heavy Runner has  
deserted from this school. He has been absent since  
the 27th instant and nothing has been heard since then  
regarding him.

Very truly yours,

Supervisor in Charge.

HCM.