

4295

CARLISLE INDIAN INDUSTRIAL SCHOOL  
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 5868	ENGLISH NAME Laverne Bouser	AGENCY Rosebud. S. D.	NATION Sioux				
BAND	INDIAN NAME	HOME ADDRESS - Mr. G. Bouser Rosebud, S. D.					
PARENTS LIVING OR DEAD	BLOOD 1/4	AGE 16	HEIGHT 5-7 1/2	WEIGHT 116 3/4	FORCED INSP. 35-1/2	FORCED EXPR. 33	SEX. M
FATHER, L	MOTHER, L	ARRIVED AT SCHOOL Oct. 10, 1913		FOR WHAT PERIOD Four years	DATE DISCHARGED Aug. 5, 1915	CAUSE OF DISCHARGE Termination of leave.	
TO COUNTRY	PATRONS NAME AND ADDRESS					FROM COUNTRY	
4-8-14	Frank Cadwallader, Lerosse, Pa.					8-28-14	
7-5-15	On leave						

THE SHAW-WALKER CO. WASHINGTON 121071

Months in school before Carlisle, .....

Grade entered at Carlisle, .....

Grade at date of Discharge, .....

Trade or Industry, .....

Church, Episcopalian



NAME Laverne Donney Sex  Male.  Female.

Tribes <sup>EnH</sup> Sioux 114 State S. Dakota Oct. 13, 1913

Age 16 years Respiration 22 Condition of, Eyes OK

Height 5 ft. 7 1/2 ins. Mensuration { Insp. 35 1/2 Ears OK

Weight 116 3/4 lbs. { Exp. 33 Throat OK

Temperature 97 Vaccination Good Scar Cervical glands OK

Pulse 72 Vision \_\_\_\_\_ Skin OK

Inspection OK

Palpation OK

Percussion OK

Auscultation OK

Heart good

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

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>yes</u>	<u>OK</u>	<u>yes</u>	
Mother	<u>yes</u>	<u>"</u>	<u>yes</u>	
Brothers	<u>3</u>	<u>"</u>	<u>yes</u>	
Sisters	<u>7</u>	<u>"</u>	<u>yes</u>	

Personal history Mumps.

Present condition good.

Edward P. Minger, 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.



OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

289

Name of Student *Laverne Bonser* Home Address \_\_\_\_\_ Tribe *Sioux*

Age at Entrance *16* Date of Entrance *10-10-13* Shop \_\_\_\_\_

	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL OR AVERAGE
Patron <i>Frank Cadivallader</i> Locality _____ Days in School _____	<i>7</i>	<i>8</i>	<i>9</i>	<i>10</i>	<i>11</i>	<i>12</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	
Address <i>Drevoze, Pa.</i> R. R. Station _____ Conduct _____													<i>2.9</i>
Recommended by _____ Grade in School _____ Ability _____													<i>4 4 4</i>
Grade of Home _____ Church _____ Health _____													<i>4 4 4</i>
Date of Outing <i>4-8-14</i> Date Returned <i>8-28-14</i> Wages _____ Earnings _____													<i>18. 10.00 10.00</i>

*4.*  
"  
"  
*7.50*



289

5-192 a

APPLICATION OF

*W. A. Bouser*

FOR THE ENROLLMENT OF

*Livern Bouser*

IN THE INDIAN SCHOOL AT

*Carlisle, Pa.*

NAME OF AGENCY FROM WHICH PUPIL CAME:

*Rosebud, S. D.*

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

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

NAME OF COLLECTING AGENT:

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 Lavera Bouser; Male; date of birth 1 197;  
(Name of child.) (Sex.)  
Seneca  
(Tribe.)

NAME OF FATHER. <small>(Both Indian and English.)</small>	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>W. A. Bouser</u> <small>NAME OF MOTHER.</small>	<u>Living</u>			<u>White</u>
<u>Mattie Bouser</u>	<u>Living</u>	<u>Seneca</u>	<u>Rocheby</u>	<u>Half</u>

I, W. A. Bouser, do hereby voluntarily consent and agree to his  
(Parent, guardian, or next of kin.)  
 enrollment in said school for a period of Four (4) 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.
<u>Pipestone Indian School</u>	<u>1907</u>	<u>1913</u>	<u>Expiration of Term</u>	<u>Seventh</u>
2.				
3.				
4.				

W. A. Bouser  
(Parent, guardian, or next of kin.)

P. O. address: Rocheby, S. D.

Two witnesses:



GOVERNMENT PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find him 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 29 day of September, 1913

W R Bebout  
Physician at Rosbud

RESERVATION BONDED SUPERINTENDENT'S CERTIFICATE.

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 W. A. Bousser  
(Parent, guardian, or next of kin.) was voluntary, and I recommend the transfer of the said child. The economic conditions of this pupil's home are (here state facts which will enable the Superintendent of the nonreservation school to give the pupil such instruction and training as may best prepare him to meet these conditions, if he is to return to them):

Does not live within reach of a public school.

This 1 day of Oct, 1913

John Stinson  
Superintendent.

NONRESERVATION SCHOOL PHYSICIAN'S CERTIFICATE.

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 \_\_\_\_\_

Nonreservation 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 shall be furnished with the original of this form for his files, and the duplicate shall be deposited in the office of the superintendent in charge of the reservation. The Reservation Superintendent will then 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. 6-870

## INDORSEMENTS.

---

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.

289

June 18th, 1915.

Mrs. M. Bonser,

St. Francis, South Dakota.

My dear Madam:

Laverne Bonser brought to me the letter you addressed to him on June the 10th, but in reply thereto I must state that he cannot be given permission to return home except it is the desire of Mr. W. A. Bonser and has the approval of Supervisor Davis.

Laverne was examined by our physician several days ago and it was learned that he then had a slight attack of gastric indigestion. Otherwise he has been well and there is no reason for his return home at this time.

Very truly yours,

HKM.

Superintendent.

DEPARTMENT OF THE INTERIOR  
UNITED STATES INDIAN SERVICE

259

Carlisle, Pa.

June 8th., 1915.

Mr. Meyer:

Laverne Bonser has a gastric indigestion as a result of which he has lost some weight. Examination of the lungs and other organs is negative. The tuberculin test also negative. I cannot recommend his dismissal from school on account of his physical condition.

Respectfully,

Walter Rindtorff M. D.

289

July 8, 1915.

Luverne Bonser  
Valentine, Nebraska.

Dear Luverne:-

Your ticket to Valentine cost you \$33.08 so that I owe you \$1.92 from the \$35 which you left with me to pay for your ticket. I enclose my personal check for \$1.92, which squares your account with me.


Trusting that you will have a very pleasant vacation and can return to us in the fall, I am

Very truly yours

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

# WESTERN UNION TELEGRAM



NEWCOMB CARLTON, PRESIDENT

GEORGE W. E. ATKINS, VICE-PRESIDENT

BELVIDERE BROOKS, VICE-PRESIDENT

CLASS OF SERVICE	SYMBOL
Day Message	
Day Letter	Blue
Night Message	Nite
Night Letter	N L

If none of these three symbols appears after the check (number of words) this is a day message. Otherwise its character is indicated by the symbol appearing after the check.

**12****RECEIVED AT**

CARLISLE OFFICE BUILDING,  
32 WEST MAIN STREET,  
CARLISLE, PA.

289

**15P R 7****VALENTINE NEBR 128PM JUNE 28TH 1915****SUPT LIPPS****INDIAN SCHOOL CARLISLE PA****LIVERNE BONSER CAN COME HOME FOR VACATION****W A BONSER****434PM***Phone 4406**See Liverne*

July 2, 1915.

Mr. W. A. Bonser,  
Rosebud,  
So Dak.

Dear Friend:

Your message that Luverne Bonser will have permission to return home has been received. Arrangements are completed for him to leave here Monday evening July 5th. Please have him met at Valentine on Wednesday.

Very truly yours,

NRD:LFR

Superintendent.

DEPARTMENT OF THE INTERIOR  
UNITED STATES INDIAN SERVICE

Rosebud, S. D.,

Sept. 10, 1915.

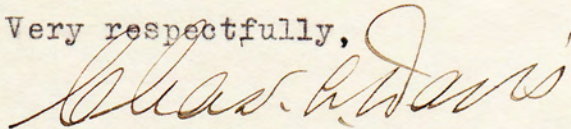
289

Mr. Oscar H. Lipps, Supt.,  
Carlisle Indian School,  
Carlisle, Pa.

Dear Sir:

I am enclosing a copy of a note I received from Dr. W. R. Bebout, our Agency physician, in which he recommends against the return of Laverne Bonser.

Very respectfully,



Supervisor in Charge.

JH/R



Copy

September 9, 1915.

Mr. Davis:

Laverne Bonser has incipient tuberculosis  
and should not return to Carlisle.

He agrees to come into hospital this  
winter.

Dr. R. W. Bebout.

Harmony Neb.

October 12th, 1915,

October 3, 1915

Mrs Laverne Bonser

Harmony, Neb.

My Friend,

I have your favor of the 3rd, requesting the balance of money to your credit here and I enclose a check herewith closing your account \$7.70. Trusting that you will improve in health I remain,

Your friend,

W.H.M.

Acting Superintendent.

return to Carlisle I will stay in the government hospital this winter and next fall I will go to Rapid City to school where the students after completing the government school are allowed to attend high school there.

I have about 7.50 there at Carlisle which I wish

Harmony Nebr.

October 3, 1915

O. H. Lipps.

Carlisle Penna

Dear Sir,

I have been examined by the doctor at Rosebud and he says that I can't return to Carlisle. I will stay in the government hospital this winter and next fall I will go to Rapid City to school where the students after completing the government school are allowed to attend high school there.

I have about \$<sup>7.00</sup><sub>100</sub> there at Carlisle which I wish

you would have the  
amount looked up and  
forwarded to me. I  
am in Harmony Neb  
with my father and sister  
& close friend  
Laverne Bonser.

Harmony  
Nebraska.  
John Ginn Jr.

Sept. 21st, 1916.

Mr. W. A. Bonser,  
Valentine, Nebraska.

My dear Mr. Bonser:

I am having enclosed herewith check No. 26787 drawn on your son Laverne's account in our school bank for an amount of \$1.50. Will you please have it delivered to him for such use as he desires to make of it?

Trusting you have been well this summer, I remain,

Very truly yours,

Encl.

HKM.

Superintendent.

Information regarding pupils to test eligibility and whether in need of Federal aid.

4295

Date of report April 26, 1915

Name of child Lanome Bonser Age 18 Grade 7a

Home post office Rosebud Agency South Dakota

Tribe Sioux Degree of Indian blood 1/4

How many acres of land do you own 160 acres Location Three miles east of the Rosebud Agency

What is the annual income from your land one third of the profits

Do you have any other income No How much

Is your father living yes

Father's name William Allen Bonser

Home post office Rosebud Agency South Dakota

Tribe White Degree of Indian blood

Is he a citizen yes

How much land does he own ~~retired none~~ Allotment No

What is its estimated value

What is the annual income from his land none

Does he have any other income no

If so, how much

Does your father pay taxes on land or personal property No

Is your mother living yes

Mother's name Mattie Bonser

Home post office Saint Francis Mission South Dakota

Tribe Sioux Degree of Indian blood 1/2

Is she a citizen yes

How much land does your mother own 320 acres Allotment No

What is its estimated value \$6,000

What is the annual income from her land No income.

Does she have any other income No.

If so, how much \_\_\_\_\_

Does your mother pay taxes on her land or on personal property No

With whom do you make your home Father

How many rooms in the house 4

How many live in the house 4.

How far is your home from the nearest public school 35 miles.

Why do you not attend that school too far away from home.

How many teachers employed there 10

How many grades maintained 10

How many months of school each year 10.

Did you ever attend a public school No.

If so, how long \_\_\_\_\_ Where \_\_\_\_\_

How many brothers of school age have you 1

How many sisters of school age have you 3

Are they in school yes

Where Sister in Carlisle, Brother Rosebud Boarding School.

Remarks and recommendations of superintendent with reference to eligibility and need of Federal aid:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Superintendent.

NOTE.—One of these blanks should be filled out by each pupil at Government boarding schools, preferably with the assistance of the superintendent or some one designated to act as his representative. If the superintendent is of opinion from the information given that the pupil is entitled to enrollment he should so indicate by signing the blank in the proper place and filing in the individual pupil's folder. In the case of pupils concerning whose eligibility or need of Government aid there is some doubt, superintendents should make proper remarks and recommendations in the space indicated and forward the form to the Indian Office for consideration.