CARLISLE INDIAN INDUSTRIAL SCHOOL Cherokee 5375 HOME DORESCHE Mrs. Jennie Loseil tan. 28,1915 v Briggs, Woodbourne, Pag Months in school before Carhste, 34 Grade entered at Carlisle, Grade at data of Discharge, Frade or Industry,

6 mi. to public school

4298 CARLISLE INDIAN SCHOOL													
No. 0375 NAME.			AGE.	1	rribe. Okoe		DEGREE NAME OF AGENCY AND RES OF INDIAN BLOOD. Dest Office of Family Cherokee W.						
DATE ENTERED. Date Entered. Months in school before enrollment here. Months in OR ROOM. -28-15- Months in OR ROOM. On ROOM. On Room. On Room. On Room. On Room. of this report.				Distance to neares public school from pupil's home.	it			nt, outing	deserters, or enrollment,				
	34		4	Ita	1	To COUNTRY	č	FROM	COUNTRY	DATE DISC	DATE DISCHARGED		
Sept 15-			TIT		APF	1 19	15	-1	~	-	_		
/					June	9,1915=		-		7-9-	15		
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										104/10	1639~		
Progre	as from							to					
Trogre	.55 1101		(Dat	e)	,-		,		(D	ate)	-,		
FIRST YEAR	IN THIS	SCHOOL	SI	EPT.	ост.	NOV,	DEC	. JAI	N. FEB.	MAR.	APR.		
Class or grade		tanding	*										
,									20721 2020 2020				
Industrial(De	partment)	tanding	*										
Musical: Ban	ds	tanding	*										
Vocal		4.1	N. S.										
Orchestra		The state of the s	White was a few or was a				77.5555	STATE OF THE PARTY.	Section Sections				
OTCHCSITE		tanding tanding	White was a few or was a										
Deportment	lS	tanding	*										
	s	tanding tanding	* *										
Deportment	s	tanding	*		()							

BRIEF. Application of Thomas Lassih FOR THE ENROLLMENT OF IN THE INDIAN SCHOOL AT Carlisle, Pennsylvania NAME OF AGENCY FROM WHICH PUPIL CAME: Date of enrollment, , 190.....

Term of enrollment,...

Application for Enrollment in a Non-reservation School. (For a child enrolled at an Agency)

of Thomas (Name Easline Che (Tribe)	of Child)	<u></u>	male;	date of birt	ch 18	96
NAME OF FATHER (Both Indian and English)	Living of Dead	or j	TRIBE	В	AND	DEGREE OF INDIAN BLOOD
Charlie Link	dead	Che	noker	Cas	lum	*Jak
NAME OF MOTHER	livi	y Che	whee	Car	luni	4/4
I, Thomas enrollment in said scho he rules and regulatio The said child has	ool for a perio	d of School .	than 3)			e to my
he rules and regulatio The said child has	ool for a perio	d of Cot less to School . in the follow	years, a yea	and also obl	ligate mysel	f to abide by
nrollment in said scho he rules and regulatio The said child has	ool for a perions for Indian been enrolled	d of School . School . in the follow	years, a yea	and also obl	ligate mysel	f to abide by
nrollment in said scho he rules and regulatio The said child has	ool for a perions for Indian been enrolled	d of Cot less to School . in the follow	years, a yea	and also obl	ligate mysel	f to abide by
nrollment in said scho he rules and regulatio The said child has NAME OF SCHOOL	ool for a perions for Indian been enrolled	d of Cot less to School . in the follow	years, a yea	and also obl	ligate mysel	f to abide by
nrollment in said scho he rules and regulatio The said child has	ool for a perions for Indian been enrolled	d of Cot less to School . in the follow	years, a yea	and also obl	ligate mysel	f to abide by
nrollment in said scho he rules and regulatio The said child has NAME OF SCHOOL	ool for a perions for Indian been enrolled	d of Cot less to School . in the follow	years, a yea	and also obl	ligate mysel	f to abide by

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 27th day of January, 19 15

Leo L Gllvott

Physician at Chewkee Agency

CERTIFICATE OF AGENT OR 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 hornous last hornous was voluntary, and I recommend the transfer of said child.

This Helle day of Jan.

, 19/6

Agent or Superintendent.

SPECIAL NOTE.

This form must be executed in duplicate when a child is transferred from a reservation to a non-reservation school. The Superintendent of the nonreservation school will retain the original for his files, and the duplicate shall be deposited in the Agency records. The agent 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.

NOTE.—Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit will be given consideration. An industrial course only can be taken and the term reduced to three years, in exceptional cases.

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 is living, and if neither of them is 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.)

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.

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



NAME Ther	nas L	ossih		Sex { Male.
Tribe $\left\{ \begin{array}{c} Full \\ \downarrow \end{array} \right\}$	Cherok	ee state N.C	***************************************	Jan 27 , 19 15
Age18_			Co	ondition of, Eyes Normal
Height5	1			Ears normal
Weight 13	Carlo	Mensuration {	2	Throat normal
Temperature 9				Cervical glands normal
Pulse 64	/	Λ .		Skin normal
Inspection		J i		
		l fremtus Equa	lall our	4
Percussion	Λ.	•		
Auscultation	Breath	& virce sounds	o.K. ro	rales
Heart				
(Menstruation)		CAMIN HISTORY		
		FAMILY HISTORY	•	
	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father			yes	unknour
Mother	ages	good health.		
Brothers	five	V ,, ,,		1
Diomers			Tuo	unknown.
Sisters	none	,	*	1
()			One	unknown
Personal history				

Present condition				
			*	
		*	ED X	Ellut, 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.

CASE R	ECOI	RD,	5—35	4.	Name	9		
Age					Sex $\left\{ egin{array}{ll} {\it Male.} & {\it Tribe} \left\{ egin{array}{ll} {\it Full} \\ {\it I} \end{array} ight\}$			
(On				., 19				
DATI	Ξ.				SYMPTOMS.	TREATMENT.	DIAGNOSIS.	REMARKS.
19	-	T.	Р.	R.	data.			History, progress, and termination of the disease.
			lanen.					
.x.coxeecas					. 654			. 1775-147-247-247-247-247-247-247-247-247-247-2
						Name = 0.0		
				****	***************************************			
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		1	1	1				

6—1955

NAME Th	umas S	Lassish	34	Sex Male.
		state W. Com	alina	Jun. 29 19
Tribe $\left\{ \begin{array}{l} \frac{Pull}{1} \\ 1/ \end{array} \right\}$				
		rs Respiration 18	Co	ndition of, Eyes Normal
Height 5	_ft	s. Mensuration Insp.	33	Ears regutino
Weight 136	' <i>lb</i>	s. Mensuration Exp.	30	Throat Muyuty enlarge
Temperature	97	Vaccination		Cervical glands hegating
		Vision 8 ovel		Skin 4
		ulopment-		
n to de	n. m. T-			₩
Percussion	<u> </u>			
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Heart				
(Manetonation)				
(412-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		FAMILY HISTOR	Υ.	
	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
	HITTING.	CONDITION OF IEEE		
Father	The			
Mother	The	ground		Trab Know
	6			
Brothers	1			4 4
Sisters	{			That bonoun.
	(٠		
Personal history	Muyuy	y Thursey Chi	chen Pat	
		ATTACA		
Present condition	1			*
		•		
		M	11-17	17-11
			all / a	ndtreff, M. D.
			5.000	

11/100

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.

	CASE	RECORD.	5-354.
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Name	
Name	

Age	Sex { Male. Female.	Tribe ${Full \choose I}$		Residence
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(On, 19....)

			SYMPTOMS.	TREATMENT.	DIAGNOSIS.	REMARKS.					
T. P. R.		T. P. R. History, progress, of the d									

		12002									

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- 000.00											
				3							
				T. P. R.	T. P. R.	T. P. II.					

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

Ha I o
Date of report
Name of child Thomas Jossin. Age 18 Grade 3.
Home post office Straywell north Carolina.
Home post office. Described the Control of the Cont
Tribe Phetokel, Degree of Indian blood fool blood
How many acres of land do you own "44 acres Location Swain County
north Carolina
What is the annual income from your land #3.0
\mathcal{L}_{1}
Do you have any other income Mow much Go.
Is your father living
Father's name Charles Loss in.
Father's name
Home post office Swagney north Corolina. M.C.
Tribe Cherokee Degree of Indian blood full bloods
Is he a citizen III.
How much land does he own \$5 acres, Allotment No
What is its estimated value \$73.
What is its estimated value
What is the annual income from his land 50 -
Does he have any other income. MS
If so, how much
Does your father pay taxes on land or personal property 465
Mes West
Is your mother living Y
Mother's name finite Lessite
Home post office SW July 19 Moyth Carlolina Mile.
Tribe Metokel Degree of Indian blood full WOOW.
Is she a citizen AlA
12 . 4411
How much land does your mother own
What is its estimated value 4.

What is the annual income from her land 712
Does she have any other income All
If so, how much \$\\psi\sum_{15}\$
Does your mother pay taxes on her land or on personal property.
With whom do you make your home May Mother There
How many rooms in the house
How many live in the house 5 Reokle
How far is your home from nearest public school 12 Miles
Why do you not attend that school I did attend that school
How many teachers employed there 3 Teachers
How many grades maintained J. g. C. a. des
How many months of school each year 12 Months
Did you ever attend a public school 465 Swain
If so, how long 5 years Where County Note.
How many brothers of school age have you.
How many sisters of school age have you. MAT. caref
Are they in school Yls
Where me in pluhoma and the other in M. Co
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.

Name of Student Homas Rossin Ho	s Cherokel. M. C. Tribe Chero										okee			
Age at 10 Date of 1-28-15- Shop												NOV.		TOTAL OR AVERAGE
Patron Waylor Briggs Address R. R. Station	Days in School													
Recommended by Grade in	Conduct				y	y								
School	Ability				e	g								
Grade of Home Church	Health				25	ly								
Date of 4-1-15 - Date 9am 6-6-15 Wages	Earnings					17.								
		**												
	7(A)													

542

July 13th, 1915.

Mrs. Jennie Lossih.

Cherokee, North Carolina.

My dear Madam:

I must advise you that your son Thomas has been a deserter since the 9th of June and that the efforts that have been made to find where he is have been without result.

If you learn where he is located or he arrives at your home please notify me at once so that definite information may be on file here regarding him.

Very truly yours,

HKM.

Acting Superintendent.

4298 May 18, 1917 Mr. J. E. Henderson, Supt., Cherokee Indian School, Cherokee, Worth Carolina. Dear Mr. Henderson: I am enclosing herewith a check for \$26.73 made payable to Thomas Lossin, a former pupil from your reservation. This represents the balance in his account here and I will thank you to deliver it to him.

Thanking you for your attention to this matter, I am

Yours very truly,

Superintendent.

LG

encl.

Y AND E' ROCH.

REPORT AFTER LEAVING CARLISLE

563757 3M-2-11

NAME AT CARLISLE

Thomas Rossih

PRESENT NAME

FRESERI NAME					
DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
					340