

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

4370

NUMBER 5551	ENGLISH NAME William Zenior	AGENCY Turtle Mt.	NATION Chippewa
BAND	INDIAN NAME	HOME ADDRESS Belcourt, N.D.	

PARENTS LIVING OR DEAD	BLOOD 3/4	AGE 23	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.
FATHER	MOTHER						

ARRIVED AT SCHOOL Sept. 17, 1916	FOR WHAT PERIOD	DATE DISCHARGED 10-4-16	CAUSE OF DISCHARGE Personal request
TO COUNTRY	PATRONS NAME AND ADDRESS		FROM COUNTRY

SHAW-WALKER, MUSKOGON, MICHIGAN. 43445

Months in school before entering 10 yrs.

Entered at Carlisle.....

Grade at date of Disch. 90.....

Grade on leaving.....

Religion: Catholic

4370

CARLISLE INDIAN SCHOOL

11

No. 5551		NAME.		AGE.	TRIBE.	DEGREE OF INDIAN.	NAME OF AGENCY AND RESERVATION, IF ENROLLED; IF NOT, POST OFFICE OF FAMILY.
William Lenoir		23		Chippewa	3/4	Jurte Mt.	
DATE ENTERED.	Months in school before enrollment here.	IN WHAT GRADE OR ROOM.		Distance to nearest public school from pupil's home.	REMARKS.		
	On entering here.	At date of this report.	(Temporarily absent, outing, deserters, on sick leave, special authorities for enrollment, etc.)				
Sept. 16, 1916	56	voc.			To COUNTRY	FROM COUNTRY	DATE DISCHARGED
							10/4/16
							Catholic

~ 1659 ~

Progress from _____ (Date), to _____ (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:

5-354.

CASE RECORD.

NAME *William Jenais* Sex Male. Female.

Tribe ^{EnH} *Chippewa* State *North Dakota* Date *Sept 19th, 1916*

Age *23* years Respiration *24* Condition of, Eyes *normal*

Height *5* ft. *7 1/4* ins. Mensuration { Insp. *38 1/2* Ears *negative*

Weight *143 1/2* lbs. { Exp. *34 1/2* Throat *immense uvula*

Temperature *98.2* Vaccination *Sept 19th* Cervical glands *negative*

Pulse *72* Vision *quad refraction* Skin *acne*

Inspection *good chest development*

Palpation *negative*

Percussion

Auscultation *râles all over chest - acute bronchitis*

Heart

(Menstruation)

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<i>Yes</i>	<i>good</i>		
Mother			<i>Yes</i>	<i>Tuberculosis</i>
Brothers	<i>2</i>	<i>good</i>	<i>4</i>	<i>causes unknown</i>
Sisters	<i>2 half sisters</i>		<i>3 sisters</i> <i>2 half sisters</i>	<i>unknown</i>

Personal history *Whooping cough, grippe*

Present condition

Walter Remittorf, 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.

October 5, 1916.

Mr. R. C. Craige,
Supt. U. S. Indian Agency,
Belcourt, N. D.

Dear Mr. Craige:

This is to advise you that William Lenore, a young man who came to Carlisle from your reservation about three weeks ago and enrolled as a student here came to my office yesterday and stated that he did not like this place and wanted to leave. Upon inquiry I found that he had \$70 in money and that his chief object in coming to Carlisle appeared to be to see the country and to find out what the school is like. In as much as he is twenty-three years of age and is apparently not serious about getting an education, there appeared to be nothing we could do for him here so I gave him my permission to leave. He left yesterday afternoon and will probably arrive at his home by the time this letter reaches you.

Very respectfully yours,

L/B

Superintendent.