

3236



# APPLICATION FOR ENROLLMENT IN A NON-RESERVATION SCHOOL

Full name of child... *Agnes Goran* Indian name is  
*Ames Non wa ho qua kanoon* Name of Father... *Mitchell Goran*  
 Name of mother... *Mary Gray* Tribe... *St Regis*  
 Reservation... *St Regis N.Y.* Degree of Indian blood of child... *full*  
 Is either parent white, if so, which?... *No* Are either or both allotted?.....  
 On what reservation?..... Age of child, *17 yrs* What reservation school attended? *St. Regis* How long? *2 yrs*  
 If ever enrolled in a nonreservation school, name of school,.....  
 When?..... How long?..... If ever dismissed from a school, where? *No*; when?..... and for what reason?.....  
 (Signed.) *Peter Cole*

NOTE—The above blank to be signed by the child, if old enough to understand its import; if not, by the parent, guardian or other person cognizant of the facts.

## CONSENT BLANK

I, *Mitchell Goran* parent, guardian or next of kin of the above-named child, *Agnes Goran*, do hereby consent to *her* transfer or enrollment for a period of five (5) years in the Indian School at Carlisle, Pa.  
 Dated at *Hogansburg N.Y.* on the *third* day of *September*, 190*6*.  
 (Signed.) *Mitchell Goran*  
 (Parent, Guardian or next of kin.)  
*Witness to mark*

## PHYSICIAN'S CERTIFICATE

I hereby certify that I have personally examined the above-named *Agnes Goran* and have found *her* physically sound, and recommend the transfer so far as *her* health conditions are concerned. Dated at *Hogansburg N.Y.* on the *fourth* day of *September*, 190*6*.  
 (Signed) *Edwin G. Klein, M.D.*

*Small but strong healthy bright looking*

## AGENT'S OR SUPERINTENDENT'S INDORSEMENT

....., 190.....  
 The statements concerning the above-named ..... are believed by me to be correct, and I hereby recommend the transfer.  
 (Signed.).....  
 U. S. Indian Agent or Superintendent.

NOTE—Age limits, twelve to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit can be given consideration.

*Card made Nov 2 06.  
S.M.*

# REPORT AFTER LEAVING CARLISLE

3236

NAME AT CARLISLE

*Agnes Loren*

PRESENT NAME

DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
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1910



483

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**BRIEF.**

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**Application of**

*Mitchell and Mary Loran*

FOR THE ENROLLMENT OF

*Agnes Loran*

IN THE INDIAN SCHOOL AT

**Carlisle, Pennsylvania**

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POST-OFFICE ADDRESS OF APPLICANT:

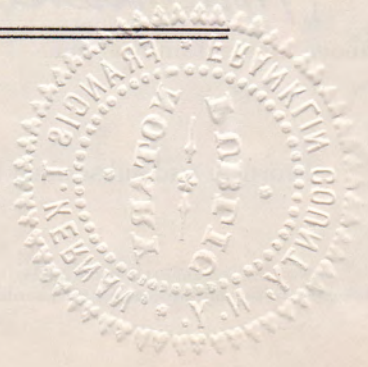
*Hogansburg, N.Y.*

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

Term of enrollment, *Five* ( *5* ) years

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# Application for Enrollment in a Nonreservation School.

(For a child not enrolled at an Agency.)

For and in consideration of the United States assuming the care, education, and maintenance in the United States Indian School at Carlisle Pa., of Agnes Loran, Girl, I, Mr Mitchell Loran (Name of child.) (Sex.) (Parent, guardian, or next of kin.) of Hogansburg P. O., State of New York, do hereby voluntarily consent and agree to enrollment in said school for a period of Three years, and also obligate and bind myself to abide by all the rules and regulations for Indian schools. (Not less than 3.)

I further say that the said child was born at Hogansburg on May 10<sup>th</sup> 1899 that the father, Mitchell Loran, is a 3/4 Indian of the St Regis Tribe located at Hogansburg Agency; that he left the tribe about \_\_\_\_\_; that the mother, Mary Loran, is a 3/4 Indian of the St Regis Tribe located at Hogansburg Agency, and left the tribe about \_\_\_\_\_; that the said child was born and reared in the United States, and now actually resides therein; and that he has attended the following schools:

NAME OF SCHOOL—PUBLIC, GOVERNMENT, OR MISSION.	LOCATED AT—	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE OF DISCHARGE.	GRADE.
<u>Government</u>	<u>Carlisle</u>			<u>under 14 yrs</u>	

This 15<sup>th</sup> day of Sept, 1913  
 Two witnesses: Mr Reyr Mr Mitchell Loran  
Peter Hopper (Parent, guardian, or next of kin.)  
 P. O., Hogansburg

(NOTE.—Every blank in this application must be properly filled out by the applicant, in his own handwriting, if possible. The signature, whether by mark or otherwise, must be attested by two witnesses.)

**AFFIDAVIT.**  
 I, Mr Mitchell Loran, do hereby swear that the statements made in the above application are true.

Mr Mitchell Loran  
 (Signature of applicant.) (Parent, guardian, or next of kin.)

Sworn to and subscribed before me this 16<sup>th</sup> day of September, 1913

Francis T. Kernan  
 Notary Public

(NOTE.—This application and affidavit must be executed before some officer authorized to administer oaths by the parent with whom the child is living; if the parents are dead, by the guardian or next of kin.)



**Certificate of Physician.**

I, McConnell, a practicing physician of Hogansburg NY, do hereby certify that I have carefully examined Agnes Loran, the child named in this application, and find that she is in proper physical condition to attend school, and is not afflicted with tuberculosis or other disease which would be a menace to the health of other pupils.  
This 16 day of Sept, 1913 McConnell M. D.

**Vouchers of Disinterested Persons.**

VOUCHER No. 1.

I, Wm Reep, a Interpreter, of St Regis Tribe, do hereby certify that I am personally acquainted with Mrs Mitchell Loran who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Agnes Loran; that she is known and recognized in the community in which he lives as an Indian; that in my opinion she can not receive proper and adequate schooling at home for the reason that she has been at Carlisle Indian School for one year and was sent home under age. She is anxious to go back  
This 15 day of Sept, 1913 Wm Reep

VOUCHER No. 2.

I, Chief John L. Barbee, a farmer of Hogansburg, do hereby certify that I am personally acquainted with Mrs Mitchell Loran, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Agnes Loran; that she is known and recognized in the community in which he lives as an Indian; and that in my opinion she cannot receive proper and adequate schooling at home for the reason that she is anxious to go back to Carlisle Indian School she was sent home on account of not being 14 yrs old  
This 15 day of Sept, 1913 Chief John L. Barbee



## Certificate of School Physician.

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

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

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

\_\_\_\_\_  
*School Physician.*

### INDORSEMENT.

A child showing one-sixteenth or less Indian blood, whose parents live on an Indian reservation, Indian fashion, who, if debarred from the Government schools, could not obtain an education, may be permitted in the reservation day and boarding schools, but it is preferable that it be not transferred to a nonreservation school, without permission from the Office. Children showing one-eighth or less Indian blood, whose parents do not live on an Indian reservation, whose home is among white people where there are churches and schools, who are presumed to have adopted the white man's manners and customs, and are to all intents and purposes white people, are debarred from enrollment in the Government nonreservation and reservation schools. Superintendents, in all cases where doubt exists as to the degree of Indian blood of a child proposed for transfer, should fully satisfy themselves of the facts by affidavits from reliable persons, which affidavits must be kept on file at the school.

A pupil who has been regularly enrolled in a nonreservation school must not be taken to any other non-reservation 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.

A pupil dismissed from school for cause must not be enrolled in any other school without the permission of the Commissioner of Indian Affairs. Full facts must be submitted with each request.





4569

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER		ENGLISH NAME			AGENCY	NATION					
2220		Agnes Loren				St. Regis, N.Y.					
BAND		INDIAN NAME			HOME ADDRESS						
					Mitchell Loren, Hogansburg, N.Y.						
PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.			
Father: Living		MOTHER: Living	Full	8	4-1/2	59			F		
ARRIVED AT SCHOOL		FOR WHAT PERIOD			DATE DISCHARGED		CAUSE OF DISCHARGE				
Oct 30 - 1906		Five (5) Years			7-7-18		Under Age				
TO COUNTRY		PATRONS NAME AND ADDRESS								FROM COUNTRY	

THE SHAW-WALKER CO., MUSKEGON-CHICAGO 33877

Months in school before Carlisle, .....

Grade entered at Carlisle, ..... 1st .....

Grade at date of Discharge, ..... 1st .....

Trade or Industry, .....

Church, ..... Methodist .....

Brought here by J. M. Caufield

**CARLISLE INDIAN INDUSTRIAL SCHOOL**  
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

4569

NUMBER 2917		ENGLISH NAME Agnes Loren			AGENCY		NATION Mohawk			
BAND		INDIAN NAME			HOME ADDRESS Mother - Mrs. Mitchell Foran, Hogansburg, N. Y.					
PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.		
FATHER	2	MOTHER	2	full	14	5-3	135	38	35	7
ARRIVED AT SCHOOL Oct. 15, 1913		FOR WHAT PERIOD Three years			DATE DISCHARGED June 22, 1916		CAUSE OF DISCHARGE Time out			
TO COUNTRY 5-29-15		PATRONS NAME AND ADDRESS Mrs. Fred Rapp, Lancaster, Pa.						FROM COUNTRY 6-17-16		

THE SHAW-WALKER CO., MUSKOGEE 121071

Months in school before Carlisle, .....

Grade entered at Carlisle, .....

Grade at date of Discharge, .....

Trade or Industry, .....

Throug. Methodist



4569

CARLISLE INDIAN SCHOOL

No. <i>2917</i>	NAME. <i>Agnus Loren</i>	AGE. <i>14</i>	TRIBE. <i>Mohawk</i>	DEGREE OF INDIAN BLOOD. <i>Full</i>	NAME OF AGENCY AND RESERVATION, IF ENROLLED; IF NOT, POST OFFICE OF FAMILY. <i>New York</i>
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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.)		
<i>Oct. 15, 13</i>	<i>27</i>		<i>Nov.</i>	<i>1/2</i>	To COUNTRY	FROM COUNTRY	DATE DISCHARGED
<i>April 1914</i>	<i>1</i>		<i>2. Grad.</i>		<b>MAY 29 1915</b>	<b>JUN 17 1916</b>	<i>6-22-16</i>
<i>Sept. 1914</i>	<i>—</i>	<i>—</i>	<i>2. III - 4</i>	<i>—</i>			
<i>" 15</i>	<i>—</i>	<i>—</i>	<i>IV</i>	<i>—</i>			
							<i>Meth.</i>

~1639~

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: .....



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

Date of report April 28, 1915

Name of child Agnes Loren Age 14 Grade Third B

Home post office Hogansburg, New York

Tribe Mohawk Degree of Indian blood one-fourth

How many acres of land do you own none Location

What is the annual income from your land

Do you have any other income How much

Is your father living Yes

Father's name Mitchell Loren

Home post office Hogansburg, New York

Tribe Mohawk Degree of Indian blood one-fourth

Is he a citizen no

How much land does he own I do not know Allotment No I do not know

What is its estimated value

What is the annual income from his land I do not know

Does he have any other income

If so, how much

Does your father pay taxes on land or personal property

Is your mother living yes

Mother's name Mary Loren

Home post office Hogansburg, New York

Tribe Mohawk Degree of Indian blood one-fourth

Is she a citizen no

How much land does your mother own none Allotment No I do not know

What is its estimated value



What is the annual income from her land no.

Does she have any other income "

If so, how much "

Does your mother pay taxes on her land or on personal property -

With whom do you make your home Parents.

How many rooms in the house Four rooms.

How many live in the house Three.

How far is your home from nearest public school one block.

Why do you not attend that school Because my parents wished me to go to Indian schools

How many teachers employed there Four

How many grades maintained Four.

How many months of school each year nine

Did you ever attend a public school no.

If so, how long - Where -

How many brothers of school age have you none.

How many sisters of school age have you none.

Are they in school -

Where -

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

*[Faint handwritten notes and signatures in the remarks section]*

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.



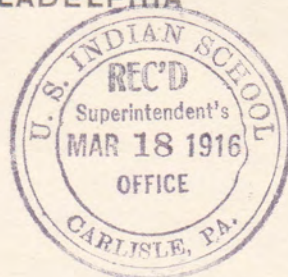
TELEPHONE { SPRUCE 4520-8 A. M. UNTIL 6 P. M.  
LOCUST 3060-6 P. M. UNTIL 8 A. M.

OFFICE HOURS:  
8 UNTIL 12

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303 SOUTH 17<sup>TH</sup> STREET  
PHILADELPHIA

March 16, 1916



Mr. O. H. Lipps,

Carlisle, Pa.

My dear Mr. Lipps;-

Agnes Loran came to see me today in reference to her eyes. Upon making an examination under the mydriatic I found a very low grade of far sightedness with a low degree of astigmatism. However, as she did not seem to complain of her eyes or head, and the defect being so little, I have suggested that glasses be kept off for the present, later on if she finds the need for them I can give her the prescription. The lids are normal.

Very truly yours,

*P. Webster*



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May 18th, 1914.

Mrs. Mitchell Loren,  
Hogansburg, New York.

My dear Madam:

I regret very much to report to you that one day last week your daughter Agnes made a deliberate plan to leave the school room in which she was then engaged at her studies in order to meet one of the school boys in a vacant room in that same building. As near as it can be determined she spent about an hour with the boy, but both of them deny positively that any immoral act was committed while they were in the room together.

Believing that under the circumstances Agnes is not a desirable pupil and that you would prefer to have her at home where you can give her the care she should be given I would thank you to send the amount that is required to pay for her transportation. About \$12.00 will be required to pay for her transportation and an additional amount of not less than \$1.00 should be sent to pay for necessary expenses en-route home.

Hoping to hear from you soon, I am,

Very respectfully,

HKM.

Supervisor in Charge.



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Fogansburgh  
New York.

5/21/14.

Dear Sir: —

I received

your letter few days ago  
and was very surprise  
to hear to that news,  
I send my daughter  
up to school, so when  
she does come home,



and I do not want  
to hear this news  
any more, after this,  
this is all.

From Mitchell  
Loran

Sturgisburg  
New York.

P. O. Box 103

2  
she would no someth  
and if she can not  
conduct herself, while  
she is at school, you  
can make her mind  
better than I can,  
and also I do not want  
her to come home  
until her time come  
I have send her for  
five years don't let  
her come back,



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*My*

April 6th, 1916.

*Agnes*

Mrs. Mary Loran,

Astoria, L. I., New York.

My dear Madam:

I have noted the request that is contained in your letter of recent date, but the information you have given is not sufficient to enable us to determine which one of the three Loren girls we have enrolled at Carlisle is the daughter you desire to see. I must also state a vacation is usually not allowed students unless the parents place on deposit a sufficient amount to pay for the return transportation of the student to whom is given the privilege of going home before the period of enrolment has terminated.

Will you let me hear from you again regarding your request?

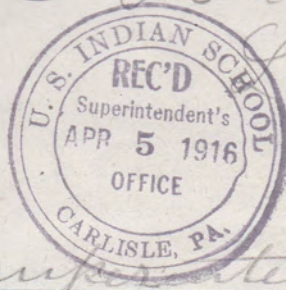
Very truly yours,

HKM.

Superintendent.



my address 226 Park Place



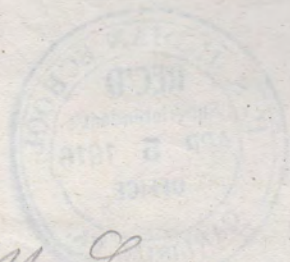
L.I. Astoria  
N.Y.

Mr. Lepps superintendent Carlisle.  
Dear sir I am going to write a few  
lines to let you know I am very  
sick so if you be kind enough to  
let my daughter go home I would  
like to see her very much

and please send her soon as possible  
will she can come back in a fall  
if she wish is if I be death and  
and gone I will be thankful if you  
take her back in Sept in Fall  
please do this for me many  
thanks Mr. Lepps your truly  
Mrs Mary Loran

Long Island Astoria N.Y.  
P.S. please write and tell  
me what you say answer  
at once





Mrs M Loran  
290 Park Place St  
L.I., City Astoria  
N.Y.



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April 12th, 1916.

Mrs. Mitchell Loran,

226 Park Place, Astoria, L. I.

Dear Madam:

Noting in your letter of recent date that you yet insist on having your daughter Agnes at home, and hearing from Agnes herself that she is planning accordingly, I take this opportunity to state that she will be entitled to receive transportation to your home at Government expense when her period of enrolment has terminated at the close of this school year next month.

She is expecting to return here from her outing home the latter part of May and it will then be arranged so that she can come to your home shortly after the 1st of June. You will be notified later just when to expect her.

Very truly yours,

HKM.

Acting Superintendent.





Carlisle Indian School

The Superintendent  
Mr Lipp

dear sir I recd your most  
welcome letter this  
morning very glad to  
hear from you well  
I awful sorry to say  
that I cant hardly wait  
and sorry to give you  
such a trouble I wont at  
Bother if I could help it  
well Mr O S Lipp  
will you tell me what





is the coast the Fare  
so I will send it the  
money so you can send  
her home My daughter  
Agnes Lorau This is all  
now Oblige to hear from  
you again

I remain your truly  
Mrs Mary Lorau  
Mrs Mitchell Lorau  
226 Park Place

let me hear from you soon  
again



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226. Park Place  
Astoria Ld. City  
N. Y.

My dear Mr Meyers,  
Agnes arrived  
safe. and met her  
at the station as you  
said.

Thanking you  
very much for letting  
us know when she  
was coming home &  
so soon -

I am yours.  
Mr. M. Loren



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June 19th, 1916.

Mrs. Mary Loren.

226 Park Place, Astoria, N. Y.

My dear Madam:

Your daughter Agnes returned here from her outing home on Saturday evening and it is now being arranged at her own request so that she can leave here on Thursday morning of this week to come to your home.

Inquiry at the local ticket office has brought us the information that Agnes cannot be provided with transportation to Long Island City, so it will be necessary for you to arrange so that you can meet her at the Pennsylvania Station in New York City when she arrives there on train No. 64 at 2:00 o'clock on Thursday afternoon.

Trusting Agnes can be met at the Station and that you will let me hear from you after she has arrived at your home, I remain,

Very respectfully,

HKM.

Acting Superintendent.



OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

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Name of Student Agnes Loram Home Address Mrs. Mitchell Loren, Hoganobri<sup>n.Y.</sup> Tribe Mohawk

Age at Entrance 14 Date of Entrance 10-15-13 Shop \_\_\_\_\_

Patron Mrs. Fred Rapp Locality \_\_\_\_\_ Days in School \_\_\_\_\_

Address Blanch. Pa. R. R. Station \_\_\_\_\_ Conduct \_\_\_\_\_

Recommended by \_\_\_\_\_ Grade in School \_\_\_\_\_ Ability \_\_\_\_\_

Grade of Home \_\_\_\_\_ Church \_\_\_\_\_ Health \_\_\_\_\_

Date of Outing 5-29-15 Date Returned 6-17-16 Wages \_\_\_\_\_ Earnings \_\_\_\_\_

JAN.	FEB.	MAR.	APR.	MAY	JUN.	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL OR AVERAGE
									all	21½	21½	20½
					y	y	y	y	y	y	y	
					y	y	y	y	y	y	y	
					y	y	y	y	y	y	y	
					6.00	6.	6					
	21½	21	18	20								
	y	y	y	y	y							
	y	y	y	y	y							