

CARLISLE INDIAN SCHOOL

4848

No. 5736

NAME.

AGE.

TRIBE.

DEGREE OF INDIAN BLOOD.

John Hall
NAME OF AGENCY AND RESERVATION, IF ENROLLED; IF NOT, POST OFFICE OF FAMILY.

Hall, William

19

Piegau

1/2

Dupuyer, Mont

Months in school before enrollment here.

IN WHAT GRADE OR ROOM.

On entering here.

At date of this report.

Distance to nearest public school from pupil's home.

REMARKS.

(Temporarily absent, outing, deserters, on sick leave, special authorities for enrollment, etc.)

DATE ENTERED.

SEP 28 1917

36

IV

TO COUNTRY

FROM COUNTRY

DATE DISCHARGED

OCT 27 1917

NOV 26 1917

Creshtua
1639

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:

Pres.

5-192a

BRIEF.

APPLICATION OF

John Hall

FOR THE ENROLLMENT OF

William Hall

IN THE INDIAN SCHOOL AT

Carlisle Pa

NAME OF AGENCY FROM WHICH PUPIL CAME:

Blackford

Date of enrollment, Sept 24, 1917

Term of enrollment, _____ (3) years.

NAME OF PERSON ARRANGING FOR THE TRANSFER:

Fleas Farris

Position, Supt

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 William Hall ; M ; age 19 ; date of birth May 8 1898 ;
(Name of child.) (Sex.)
Piqua
(Tribe.)

NAME OF FATHER. <small>(Both Indian and English.)</small>	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>John Hall</u>	<u>Living</u>	<u>White man</u>		
NAME OF MOTHER.				
<u>Josephine Hall</u>	<u>Dead</u>	<u>Piqua</u>		<u>Full</u>

I, _____, do hereby voluntarily consent and agree to his
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of 3 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>Holy Family Mission</u>	<u>1910</u>	<u>1911</u>		
<u>Boarding School D.D. U.S.</u>	<u>1911</u>	<u>1913</u>		
<u>Channah</u>	<u>1913</u>	<u>1913</u>	<u>Ran away</u>	<u>4th grade</u>

Thomas Ferris
(Parent, guardian, or next of kin.)

P. O. address: Browning

Two witnesses:

Monte

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find *Ami* 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 *24* day of *Sept*, 191*7*

W. H. Hall M.D.
Physician at *Blackfoot* 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 *John Hall*
(Parent, guardian, or next of kin.)
was voluntary.

(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.)

I recommend the transfer of the said child.

This *24* day of *Sept*, 191*7*

Thomas Turner
Agent or Superintendent.

CERTIFICATE OF SCHOOL PHYSICIAN.

I hereby certify that on *10/1/17*, I made a careful examination of the physical condition of *William Hall*
(As soon after arrival as possible.)
the child named in the foregoing application, and found *Ami* to be *in good*
Physical Condition

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

This *1st* day of *October*, 191*7*

Edward J. Meeger
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.

PHYSICIAN'S CERTIFICATE

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL

I hereby certify that I have this day carefully examined the above named child and find him/her 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.

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 employe 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.

SPECIAL NOTE

This form may 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 will be retained in the reservation school records. The nonreservation superintendent should send to the Commissioner of Indian Affairs a copy of this form. If the information called for on any part of the form is not correct, the form should be marked "Do not apply" and returned to the parent. We advise the parent to check their names and dates. The parent who signs the form is consenting to the transfer of the child to the school named in the application. The word "parent" includes "guardian," "custodian," or "next of kin," depending on the facts of the case.

NAME William Hall Sex Male Female

Tribe ^{Full} 1/2 State Mont Date Sept 24, 1917

Age 19 years Respiration Normal Condition of, Eyes

Height 5 ft. 10 ins. Mensuration { Insp. 37 Ears Normal

Weight 153 lbs. { Exp. 33 Throat Normal

Temperature 98 6/10 Vaccination Yes Cervical glands Normal

Pulse 80-96 Vision Normal Skin Normal

Inspection

Palpation Normal

Percussion Normal

Auscultation Normal

Heart Rapid

(Menstruation)

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>Living</u>	<u>Very good</u>		
Mother	<u>Dead</u>			<u>Child birth</u>
Brothers	<u>6</u>			
Sisters	<u>4</u>			

Personal history

Present condition

W. B. Kell, 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.

