

DEPARTMENT OF THE INTERIOR

UNITED STATES INDIAN SCHOOL

CARLISLE, PA.

OUTING SYSTEM

MRS. NELLIE R. DENNY, Manager.

MISS LIDA M. JOHNSTON, Girls' Agent.

MR. D. H. DICKEY, Boys' Agent.

P. O. F. A. 15th & Cherry Sts.,
Philadelphia, Pa.,
August 22-1918.

245
Mr. C. V. Peel,
Trans. And. In Charge,
U. S. Indian School,
Carlisle, Pa.

Dear Mr. Peel; -

Martha Little Plume was taken to the Bryn Mawr Hospital, Thursday morning, August 15th after she had had two hemorrhages from the lungs. She is in a fine hospital and receiving the best of care. Horse serum is being used. During the week she has had about five more hemorrhages. The last one was on Wednesday morning. I saw her Wednesday afternoon and she does not look badly but of course, is being kept very quiet which the physician says is absolutely necessary. I talked with Doctor Hubbard, in charge, and told him not to discharge her until he felt she was equal to the trip to Montana and when he so decides he will wire you.

This morning I called by tely home and the reply was that she had had an easy night and was resting well. I will call again to night and will see her again on Friday morning. Dr. Hubbard expected to make an X-ray examination this morning. I will report the results of this as soon as I learn them. Very respectfully,
Lida M. Johnston

Girls' Quarters.
Room Door Card

No._____

1 _____

2 _____

3 _____

4 _____

Clothing for

Mauiha Littleplume

4 Underwear 1 Comb
2 old gray skirts 1 brush
1 " gray dress
1 white skirt
1 " waist
2 old blue chambray dresses
1 cape -
5 towels -

Packed by L. M. Johnson -
Sept 10 - 18.

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

SHAW-WALKER, MUSHERICH, MICHIGAN. 60940

4th

Catholic

248
5-192 a

BRIEF.

APPLICATION OF

FOR THE ENROLLMENT OF

Mattha Lita Plume

IN THE INDIAN SCHOOL AT

Carlisle Penn.

NAME OF AGENCY FROM WHICH PUPIL CAME:

B. L. Haffner Agency

Date of enrollment, *21*, 191

Term of enrollment, *Three (3)* years.

NAME OF PERSON ARRANGING FOR THE TRANSFER:

Thomas Ferris

Position,

Supt.

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find 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.

This 18 day of October, 1917

W. R. Hill 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 _____
(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 18 day of Oct, 1917

Thomas Lewis
Agent or Superintendent.

CERTIFICATE OF SCHOOL PHYSICIAN.

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

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

This _____ day of _____, 1917

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.

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 Penn

of Martha Little Plume; Female, age 20; date of birth _____;
(Name of child.) (Sex.)
Piegau
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Little Plume</u>	<u>dead</u>	<u>Piegau</u>		<u>Full</u>
NAME OF MOTHER.				
<u>Mrs Little Plume</u>	<u>lv.</u>	<u>Piegau</u>		<u>Full</u>

I, Martha Little Plume, do hereby voluntarily consent and agree to _____
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of _____ 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>1907</u>	<u>1911</u>		<u>4th</u>
2.				
3.				
4.				

Martha Little Plume
(Parent, guardian, or next of kin.)

P. O. address: _____

Two witnesses:

Gen. Crow
Mark F. Grady

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.

NAME Martha Little Plume Sex Female

Tribe Full Piegue State Montana Date October 18, 1917

Age 20 years Respiration Normal Condition of, Eyes Normal

Height 5 ft. 4 ins. Ears Normal

Weight 117 lbs. Mensuration { Insp. 33

Temperature Normal Vaccination No Throat Normal

Pulse 72 Vision Normal Cervical glands Normal

Inspection Normal Skin Normal

Palpation Normal

Percussion Normal

Auscultation Normal

Heart Normal

(Menstruation) Regular

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father			<u>67</u>	<u>Hepatitis</u>
Mother	<u>57</u>	<u>Good</u>		
Brothers <u>2</u>		<u>Good</u>	<u>1</u>	<u>Accident</u>
		<u>Good Fair</u>		
Sisters <u>3</u>	<u>Good</u>			
	<u>Good</u>			
	<u>Good</u>			

Personal history

Present condition

W. R. Keel, 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.

Name _____

Age _____ Sex { Male. / Female. } Tribe { Full / } _____ Residence _____

(On _____, 19____)

Month of July.

PUPIL'S HEALTH REPORT.

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This blank is issued so that the school authorities may keep in touch with the health of the pupil. The patron is requested to fill this blank out on the first of MAY, JULY, SEPTEMBER, NOVEMBER, JANUARY, and MARCH, and send it to the school with the outing report for the month.

Patron's name and address Isabel Harrington

Pupil's name Mathew Little-Plume

General health of the pupil good

Has pupil been ill the past two months? No.

Name of disease none

Name and address of physician in attendance

Does the pupil have a cough? Some-times

For how long has he had it? Ever since she came from South

Has the pupil lost weight? No.

If so, how much?

Has the pupil any trouble with the eyes? No

Are the eyes inflamed? No

Remarks: I am truly sorry that Mathew has to return to Charlotte would you mind letting me know by return mail if it would be possible for her to stay a little longer with me.

Date July 9th 1918

In case of serious illness, notify the school at once and have the physician in attendance send in a written report of the case.

Catholic

(Date)

(Date)

Remarks:

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September 2, 1918.

Mr. F. C. Campbell
Supervisor in Charge Blackfeet Agency
Browning, Montana.

Dear Sir:-

Do you not think it would be advisable to send Martha Little Plume to the Sag and Fox Sanatorium located at Toledo, Iowa ? Will you please get into immediate communication with her parents and let me know if this arrangement would be agreeable to them. I can arrange to send her there at government expense as soon as she is able to travel, provided of course, that Dr. Russell will take her. Will you please wire so as to expedite matters.

Very truly yours

Trav. Aud. in Charge.

NRD

DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SCHOOL
CARLISLE, PA.

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Confirmation of Telegram

Bryn Mawr, Pa., Aug. 29, 1918.

Mail to

C. V. Peel, Supt.
Indian School, Carlisle, Pa.

Dear Sir: Martha Littleplume will be unable to go
to Carlisle tomorrow.

F. C. Hubbard, M.D.
Bryn Mawr Hospital

Sent M.
(Eastern time.)

By
Government rate.

PAID—COLLECT

.....
Superintendent.

Per

All messages phoned to city telegraph offices, unless otherwise noted.

243

Waverch, Pa.

Dear Mr. Peel

Matha had a
little Hemorage last night
I sent for the doctor and
he says that Matha would
be much better out West
I will keep her quiet until
you can send Miss Johnson
for her I think that
she is tubercular, please

Excuse all errors as I'm
in great-haste will you
let me hear from you
immediately.

Sincerely yours
I Herrington

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, FIRST 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.

RECEIVED AT

20P S. 6

Martha Little Plummer

245-

LLANARCH PA 1141AM AUG 16 1918

MR PEEL

SUPT CARLISLE INDIAN SCHOOL CARLISLE PA.

MARTHA HAD THIRD HEMORRHAGE IN HOSPITAL

ISABEL HERRINGTON

135P

Telephone No.	
Telephoned to <i>Schwach</i>	
Time Delivered <i>153 PM</i>	
By <i>Dt</i>	To Be <i>Mailed</i>
Attempts to Deliver	

245

DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SCHOOL
CARLISLE, PA.

Confirmation of Telegram

Bryn Mawr, Pa., Sept. 2, 1918.

Mail to

C. V. Peel,
Supt Indian School,
Carlisle, Pa.

Martha Little Plume will be unable to go to Carlisle
before last the week.

Fred C. Hubbard.

collect

Sent M.
(Eastern time.)

By
Government rate.

PAID—COLLECT

.....
Superintendent.

Per

245

CERTIFICATE OF PROMOTION

June 14, 1918., 191

This certifies that Martha Littleplume

(Name of student.)

has made the following record in Carlisle Indian School

(Name of school.)

SUBJECTS—ACADEMIC AND VOCATIONAL.

GRADE.

RATING.

English

Fourth

91

General Exercises

"

88

Arithmetic

"

93

Geography

"

75

Physiology

"

75

Writing

"

78

Drawing

"

80

Music

"

91

General Average

Effort

Deportment

DETAILS SERVED.

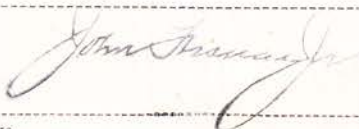
LENGTH OF TIME IN EACH.

RATING.

Industrial

75

and is ~~not~~ eligible to pursue work in the Fifth grade, academic; and
 (Cancel one.)
 _____ grade or year vocational.



6-4659

Superintendent.



Principal.