

CARLISLE INDIAN SCHOOL

5173

No. **5479** NAME. *Smith, Alphons* AGE. *17* TRIBE. *Oneida* DEGREE OF INDIAN BLOOD. *7* NAME OF AGENCY AND RESERVATION, IF ENROLLED; IF NOT, POST OFFICE OF FAMILY. *West Deperz, Wis. Oneida*

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>11-29-15</i>							
<i>Sept. 76.</i>	<i>84.</i>	<i>V</i>	<i>-</i>	<i>4m.</i>	To COUNTRY	FROM COUNTRY	DATE DISCHARGED
			<i>Va.</i>		<b>MAR 30 1916</b>	<b>AUG 31 1917</b>	
			<i>1000</i>				<b>JUN - 8 1918</b>
							<i>Episcopal</i>

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: \_\_\_\_\_

CARLISLE INDIAN INDUSTRIAL SCHOOL

5173

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 5-479	ENGLISH NAME Alpheus Smith	AGENCY Oneida	NATION Oneida				
BAND	INDIAN NAME	HOME ADDRESS Mother - Mrs. Louisa Smith, West Depue, Wis.					
PARENTS LIVING OR DEAD F	BLOOD full	AGE 17	HEIGHT 5-7	WEIGHT 147	FORCED INSP. 36½	FORCED EXPR. 33½	SEX M
FATHER	MOTHER	ARRIVED AT SCHOOL Nov. 29, 1915	FOR WHAT PERIOD Three years	DATE DISCHARGED June 8, 1918	CAUSE OF DISCHARGE Time out		
TO COUNTRY 3-30-16	PATRONS NAME AND ADDRESS Alfred Krusen, Newtown, Pa.					FROM COUNTRY 8-30-17	

SHAW-WALKER, MUSKOGEE, MICHIGAN. 4345

Months in school before Carlisle, *8 yrs.*

Grade entered at Carlisle, .....

Grade at date of Discharge, .....

Trade or Industry, .....

Church, *Episcopal* .....

*4 mi. to school*

522

5-192 a

BRIEF.

APPLICATION OF

Louisa Smith

FOR THE ENROLLMENT OF

Alpheus Smith

IN THE INDIAN SCHOOL AT

Carlisle, Pa.

NAME OF AGENCY FROM WHICH PUPIL CAME:

Oneida, Wis.

Date of enrollment, Sept., 1915

Term of enrollment, three (3) years.

NAME OF COLLECTING AGENT:

Position,

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 Alpheus Smith; m; date of birth 1895;

(Name of child.)

(Sex.)

(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Charles Smith</u>	<u>2</u>	<u>Onondaga</u>		<u>1/2</u>
NAME OF MOTHER.				
<u>Jerusa Smith</u>	<u>2</u>	<u>"</u>		<u>3/4</u>

I, Jerusa Smith, do hereby voluntarily consent and agree to

(Parent, guardian, or next of kin.)

enrollment in said school for a period of 3 years, and also obligate myself to abide by all the rules and regulations for Indian schools.

(Not less than 3.)

The said child has been enrolled in the following schools:

NAME OF SCHOOL.	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE.	GRADE.
1. <u>Onondaga</u>	<u>1903-11</u>	<u>13-14</u>		<u>5 B</u>
2.				
3.				
4.				

Louise Smith

(Parent, guardian, or next of kin.)

P. O. address: \_\_\_\_\_

Two witnesses: \_\_\_\_\_

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have this day carefully examined the above-named child herein proposed for transfer and find ..... 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 ..... day of ....., 191

*Cert attached*

Physician at ..... 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 *James S. Smith* ..... (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.)

*No school of available grade near.*

I recommend the transfer of the said child.

This *8* day of *Oct*, 191*5*

*J. C. Hart*

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 ....., 191

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 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.

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.

## 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 Alpheus Smith Sex  Male  Female  
 Tribe  Full  Oneida State Wisconsin Nov. 6<sup>th</sup>, 1915

Age 17 years Respiration 18 Condition of Eyes OK  
 Height 5 ft. 7 ins. Ears OK  
 Weight 147 lbs. Mensuration { Insp. 36½  
 Exp. 33½ Throat OK  
 Temperature 98.1 Vaccination Yes Cervical glands None  
 Pulse 66 Vision Normal Skin Clear

Inspection Expansion free & equal  
 Palpation normal

Percussion resonance good throughout

Auscultation Breath sounds clear

Heart sounds normal, pulse regular & full  
 (Menstruation) \_\_\_\_\_

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	yes	good		
Mother	yes	good		
Brothers	5	good	0	
Sisters	2	good	3	In childhood & infancy.

Personal history Has had measles & mumps in childhood perfectly well since.

Present condition He is in perfect physical condition.

Roll L Cowles, M. D.  
 for Dr. W. E. Fairfield

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.





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Febr. 11th, 1916.

Mr. Harrison Smith,

Oneida School, Oneida, Wis.

My dear Friend:

Referring to the communication you addressed to Mr. Meyer at this school in regard to the cowardly attack that was made on your brother Alpheus by two boys here, this is to advise that yesterday the two fellows who made the attack were sentenced to ninety day terms of confinement in the Cumberland County jail when they admitted their guilt.

When your brother was seen at this office this afternoon he stated that he has fully recovered from the assault and that he has resumed his regular school work.

Thanking you for this opportunity to reassure you concerning your brother, I remain,

Very truly yours,

HKM.

Superintendent.

THIS SIDE OF CARD IS FOR ADDRESS ONLY

FEB  
9  
A.M.  
1910

WIS.

Harvey Myers  
Indian School  
Carlisle  
Pennsylvania

Greida Wis

Feb. 9, 1910.

I have learned that my  
brother Alphonse has been  
badly beaten by couple  
cowards. I wish to know  
the account of soon. If  
it is any thing serious,  
I would be truly  
Yours truly  
Harriet Smith

REPORT OF Alpheus Smith pupil of Carlisle Indian  
 School, who went 31-30-16 to live with Alfred Krusen  
(Date) (Patron)  
 of Newtown, Bucks,  
(Post Office) (County)  
Pa. Newtown Railroad Station  
(State)

Conduct Excellent  
 Health Very good  
 Ability Excellent  
 Cleanliness Good  
 Economy Good  
 Situation of Room Second floor  
 Condition of Room Good  
 Condition of Clothing Good and kept tidy  
 Wages \$18.00 Eighteen dollars  
 Are careful accounts kept by patron? yes  
 Are careful accounts kept by pupil? yes  
 Number of days at school Summer cutting  
 Distance to school " "  
 Grade or quality of school " "  
 Name and address of teacher " "  
 Qualifications of teacher " "  
 In what grade was pupil at Carlisle? " "  
 In what grade is pupil at present? " "  
 Attends what church and Sunday school? Catholic  
 Distance to church 9 or 10 miles by trolley  
 Is there a Catholic church in locality? yes  
 Who compose patron's family? Man and wife & children  
 What other help is employed? Irregular farm help  
 Locality of home Near Newtown Pa.  
 Home life and environments Good  
 Trade at school Smith  
 Nature of work Farm  
 Pupil's age 19 Experience Good

Any general statement or wishes of patron or pupils, together with Agent's estimate of place, people, and pupil:

Ruled lines for writing a general statement or wishes of the patron or pupils, and the Agent's estimate of the place, people, and pupils.

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

822

Name of Student Alphens Smith Home Address Romise Smith, W. Depere, Wis. Tribe Oneida

Age at Entrance 17 Date of Entrance 11-29-15 Shop

Patron Alfred Kansen  
Address Newtown, Pa.  
Recommended by

Locality  
R. R. Station  
Grade in School

Grade of Home Church

Date of Outing 3-30-16 Date Returned

Wages

JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.	TOTAL OR AVERAGE
					y	y	y	y	y	y	y	22
					y	y	y	y	y	y	y	22
					y	y	y	y	y	y	y	
					y	y	y	y	y	y	y	
					20.	20.	20.	20.	20.	20.	20.	

1917 23 20  
y y  
y y  
y y

# OUTING RECORD — CARLISLE INDUSTRIAL SCHOOL

Name of Student			Home Address								Tribe					TOTAL OR AVERAGE
Age at Entrance	Date of Entrance	Shop	JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG.	SEPT.	OCT.	NOV.	DEC.		
Patron		Locality	Days in School													
Address		R. R. Station	Conduct													
Recommended by		Grade in School	Ability													
Grade of Home		Church	Health													
Date of Outing	Date Returned	Wages	Earnings													

CERTIFICATE OF PROMOTION

522

June 14, 1918, 191

This certifies that Alpheus Smith  
(Name of student.)

has made the following record in Carlisle Indian School  
(Name of school.)

SUBJECTS—ACADEMIC AND VOCATIONAL.	GRADE.	RATING.
English	1st Yr. Voc.	80
Arithmetic	"	79
Geography	"	89
Botany	"	90
General Exercises	"	81
General Average	"	82

Effort \_\_\_\_\_

Department \_\_\_\_\_

DETAILS SERVED.	LENGTH OF TIME IN EACH.	RATING.
Industrial		91

and is ~~not~~ eligible to pursue work in the Second Year Vocational grade, academic; and  
(Cancel one.)  
\_\_\_\_\_ grade or year vocational

*John H. ...*  
Superintendent.

*Clay Blair*  
Principal.