

CARLISLE INDIAN INDUSTRIAL SCHOOL

5614

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER 3077		ENGLISH NAME Margaret Raiche LaPointe			AGENCY Chippewa		NATION Chippewa	
BAND		INDIAN NAME		HOME ADDRESS Mother - Mrs. Veronica Raiche Udawanah, Wis.				
PARENTS LIVING OR DEAD 2		BLOOD 1/8	AGE 14	HEIGHT 5-5	WEIGHT 110	FORCED INSP. 32 1/2	FORCED EXPR. 28 1/2	SEX F
FATHER		MOTHER		ARRIVED AT SCHOOL Oct. 1, 1915		FOR WHAT PERIOD Three years		DATE DISCHARGED July 9, 1917
						CAUSE OF DISCHARGE Time out		
TO COUNTRY			PATRONS NAME AND ADDRESS				FROM COUNTRY	

SHAW-WALKER, BUREAU, MILWAUKEE, WISCONSIN 43445

Months in school before Carlisle, 6 yrs.

Grade entered at Carlisle, _____

Grade at date of Discharge, _____

Trade or Ind. _____

Church, Catholic

1/4 mi. to school.

5614

CARLISLE INDIAN SCHOOL

No. 3077

NAME.

Raiche, Margaret

AGE.

14

TRIBE.

Chippewa

DEGREE
OF
INDIAN
BLOOD.

1/8

NAME OF AGENCY AND RESER-
VATION, IF ENROLLED; IF NOT,
POST OFFICE OF FAMILY.

La Pointe

Months
in
school
before
enroll-
ment
here.

DATE ENTERED.

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.)

6 yrs.

IX

-

1/2 m.

TO COUNTRY

FROM COUNTRY

DATE DISCHARGED

Sept, 1916

-

-

X

-

JUL - 9 1917

Cath

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: _____

399



5-192a

BRIEF.

APPLICATION OF

Mrs. Veronica Raiche

FOR THE ENROLLMENT OF

Margaret S. Raiche

IN THE INDIAN SCHOOL AT

Carlisle, Penn.

NAME OF AGENCY FROM WHICH PUPIL CAME:

LaPointe Agency, Wisconsin.

Date of enrollment, _____, 191

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

NAME OF PERSON ARRANGING FOR THE TRANSFER:

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, Penn

of Margaret S. Raiche, Female, age 14; date of birth December 22, 1900.
(Name of child.) (Sex.)
Chippewa
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>Joseph A. Raiche</u>	<u>Living</u>	<u>Whiteman</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
NAME OF MOTHER.				
<u>Veronica Raiche</u>	<u>Living</u>	<u>Chippewa</u>	<u>Bad River</u>	<u>5/8</u>

I, Mrs. Veronica Raiche do hereby voluntarily consent and agree to her
(Parent, guardian, or next of kin.)
 enrollment in said school for a period of three 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>St. Mary's Industrial</u>	<u>1906</u>	<u>1915</u>	<u>Graduated</u>	<u>7th Grade</u>
2.				
3.				
4.				

Mrs. Veronica Raiche
(Parent, guardian, or next of kin.)

P. O. address: Odawa

Wis

Two witnesses:

Henry J. Key
R. G. Podunice

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 11 day of August, 1915

[Signature]

Physician at [Agency] Agency.

1900.

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 Veronica Raiche (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.)

Margaret S. Raiche lives adjacent to public school and is eligible for enrollment therein. Other members of the family are however enrolled at Carlisle and the mother desires that all the children be together.

I recommend the transfer of the said child.

This 12 day of August, 1915

[Signature]
Agent or Superintendent. ✓
Spl. Dist. Agent.

CERTIFICATE OF SCHOOL PHYSICIAN.

I hereby certify that on _____, I made a careful examination of the physical condition of _____, 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 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.

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 Margaret S. Rucki Sex ~~Male~~ Female.

Tribes { Full } Chippewa State Wis Aug 11, 1951

Age 14 years Respiration 19 Condition of, Eyes O.K.

Height 5 ft. 5 ins. Ears O.K.

Weight 110 lbs. Mensuration { Insp. 32 1/2 Exp. 28 1/2 Throat O.K.

Temperature 98 6/10 Vaccination Yes Cervical glands O.K.

Pulse 73 Vision Yes Skin clear

Inspection Well developed

Palpation Normal tones

Percussion No dullness

Auscultation No rales. Tones normal.

Heart Normal

(Menstruation) Regular 28 day type

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	<u>50</u>	<u>good</u>		
Mother	<u>43</u>	<u>good</u>		
Brothers <u>one</u>	<u>10</u>	<u>good</u>		
Sisters <u>five</u>	<u>yes</u>	<u>good</u>		

Personal history Measles, mumps, Whooping cough, diphtheria
Chicken pox.

Present condition Healthy

A. Sincovec, 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.

399

5-192a

BRIEF.

APPLICATION OF

Mrs. V. Raiche

FOR THE ENROLLMENT OF

Margaret Raiche

IN THE INDIAN SCHOOL AT

Carlisle Pa.

NAME OF AGENCY FROM WHICH PUPIL CAME:

Odessa Tea Pointe

Date of enrollment, _____, 191 *4*

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

NAME OF PERSON ARRANGING FOR THE TRANSFER:

Mrs. V. Raiche

Position, *mother*

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 Margaret Raiche; female; age 14; date of birth Dec. 22, 1908;
(Name of child.) (Sex.)
Chippewa
(Tribe.)

NAME OF FATHER. (Both Indian and English.)	LIVING OR DEAD.	TRIBE.	BAND.	DEGREE OF INDIAN BLOOD.
<u>J. A. Raiche</u>	<u>living</u>	<u>white</u>		
NAME OF MOTHER.	"	<u>Chippewa</u>	<u>La Pointe one-half</u>	

I, Mrs V Raiche, do hereby voluntarily consent and agree to her
(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>1. St. Mary's Catholic</u>	<u>1908</u>	<u>1914</u>	<u>change in church</u>	<u>7th</u>
<u>2.</u>				
<u>3.</u>				
<u>4.</u>				

Mrs V. Raiche
(Parent, guardian, or next of kin.)

P. O. address: Osauak

Two witnesses:

A. J. Timmer
J. A. L. Doan.

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 *27* day of *Aug*, 191*4*

H. S. Smith

Physician at *Odanah* 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 _____ was voluntary. (Parent, guardian, or next of kin.)

(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 *31* day of *August*, 191*4*

J. H. Brown

Agent or Superintendent.

CERTIFICATE OF SCHOOL PHYSICIAN.

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

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

This _____ day of _____, 191

School Physician.

SPECIAL NOTE.

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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 Margaret Bant Sex Male Female

Tribes Full Part Chippewa State Wis Age 14 years

Respiration 19 Condition of, Eyes O.K.

Height 5 ft. 4 ins. Mensuration { Insp. 31 Ears O.K.

Weight 104 lbs. { Exp. 27 Throat O.K.

Temperature 98 6/10 Vaccination yes Cervical glands O.K.

Pulse 73 Vision O.K. Skin O.K.

Inspection Thin chest

Palpation Tones Normal

Percussion Tones Normal

Auscultation Tones Normal

Heart O.K.

(Menstruation) Regular 28 day type

FAMILY HISTORY.

	LIVING.	CONDITION OF HEALTH.	DEAD.	CAUSE OF DEATH.
Father	yes	good		
Mother	yes	good		
Brothers	yes	good		
Sisters	yes	good		

Personal history Measles, Mumps, Whooping Cough

Present condition good

J. H. Hancock, 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: Margaret Raiche
AGE: 16
SEX: Female
TRIBE: Chippewa
DEGREE OF BLOOD 1/8
GRADUATED: Special Course
HEALTH: Good
COURSE PURSUED: Home Economics
HOW PERSONAL FUNDS ARE HANDLED:

Careful in spending her money.

BIOGRAPHICAL SKETCH:

621

She is the daughter of Albert and Veronica H Holliday Raiche. Their home is at Odanah, Wisconsin. Father is a clerk in a general store at Odanah and is well educated, receiving his education in Canada. Mother received her education at Carlisle. Father owns home and mother owns land in Michigan. She has worked in all departments at Carlisle since coming here. She likes nursing the best and wishes to attend High School and then get into a hospital.

September 24, 1917.

Commissioner of Indian Affairs
Washington, D. C.

Sir:

Reference is made to your letter of April 28, 1917, in which you direct attention to that paragraph of the Declaration of Policy in the Administration of Indian Affairs which refers to Indian students who have completed the course of instruction in the Government schools, being declared competent.

In accordance with these directions I have the honor to report that Margaret Raiche, a 1/8 blood Chippewa Indian, 16 years of age, passed her examinations and on May 24, 1917 was graduated from this school in Home Economics, in accordance with the Special Course.

Margaret is the daughter of Albert and Veronica H. Holliday Raiche. Their home is at Odanah, Wisconsin. Her father is a clerk in a general store at that place, and is well educated, receiving his education in Canada. Her mother received her education at Carlisle. Her father and mother owns lands in Michigan. She has worked in all departments at Carlisle. She liked nursing best.

Principal Blair reports that Margaret is a well-bred girl, rather fond of books; normal in her attitude toward things in general. She studies because she is too proud to fail, not from great love of books. She is just an average, affectionate and lovable girl, who usually does right, a white in her instincts as well as in appearance.

Matilda G. Ewing reports that Margaret is a young and inexperienced girl, and needs the guidance of a firm person, until she finishes her education. She is very unsettled as to her future work. She is obedient, takes advise and tries to do the right.

--2--

Margaret is in good health, and is careful in spending money.

Margaret is too young for any steps to be taken with regard to removing her restrictions at this time.

Very truly yours,

Superintendent.

CERTIFICATE OF PROMOTION

May 24, 1917, 191

This certifies that Margaret Raiche
(Name of student.)

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

SUBJECTS—ACADEMIC AND VOCATIONAL.	GRADE.	RATING.
English	4th Voc.	88
General Exercises		88
Child Study		84
Plant Diseases		83
Insects and Insecticides		78
Household Chemistry		73
Sewing		82
Cooking		83

Effort _____

Department _____

DETAILS SERVED.	LENGTH OF TIME IN EACH.	RATING.
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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

CERTIFICATE OF PROMOTION

May 24, 1917, 191

This certifies that Margaret Faiche

(Name of student.)

has made the following record in Carlisle Indian School

(Name of school.)

SUBJECTS—ACADEMIC AND VOCATIONAL.

GRADE.

RATING.

English 4th Voc. 88

General Exercises 88

Child Study 84

Plant Diseases 83

Insects and Insecticides 78

Household Chemistry 73

Sewing 82

Cooking 83

Effort

Department

DETAILS SERVED.

LENGTH OF TIME IN EACH.

RATING.

Table with 3 columns: DETAILS SERVED., LENGTH OF TIME IN EACH., RATING. (Empty rows)

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

_____ grade or year vocational.

Signature of Superintendent

Signature of Principal