Address Shingle Springs, Calif.

Information from Carlisle,

Date June 6, 1910

StateCalif Agency no Agency, Tribe Digger
POSITIONS FOR WHICH LISTED. SUITABILITY IN ORDER NAMED.

1. Plumbing & steam fitting2

. 4

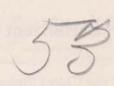
Remarks:

at Carlisle (self supporting)

PARENTS LIVING OR DEAD nly 12, 1910 mov. 15, 1909 TO COUNTRY k. Tayloraville, R.F.D. Pal. 8-2 THE SHAW-WALKER CO., MUSTEGON-CHICAGO 33877 Months in school before Carlisle, ..... rade entered at Carlisle, 6th Grade at date of Discharge,..... Trade or Industry, Plumb

miles

Readmitter 1 maxie Luce HOME ADDRESS BLOOD HEIGHT FORCED INSP. PARENTS LIVING OR DEAD 22 Jull no MOTHER. ARRIVED AT SCHOOL DATE DISCHARGED CAUSE OF DISCHARGE Dukness 5 - 11 - 12 Nov. 22,1911 TO COUNTRY PATRONS NAME AND ADDRESS FROM COUNTRY THE BHAW-WALMER CO., MURKEGON \$2 TO 7.1 Months in school before Carlisle. leads outstell at Cartisle, .... Jhurch,.....



### BRIEF.

Application of

FOR THE ENROLLMENT OF

IN THE INDIAN SCHOOL

Carlisle, Pennsylvania

POST-OFFICE ADDRESS OF APPLICANT:

Date of enrollment, 100, 2 ( 1 ) years

# Application for Enrollment in a Nonreservation School.

For and in consideration of th			lucation, a	and mainte	nance in
the United States Indian School at	Carli	ele.	,	6a	, of
Maxie Tuce	2 . M.	I. Ma	Lie	- 2	ree
					m.)
of Carlisle P. (			/		
and agree to enrollme	nt in said school for	a period of (Not less	L year	s, and also	obligate
and bind myself to abide by all the				. 0	G G
I further say that the said chil	d was born at		on	(Date.)	0 (;
that the father, (Name of father					
Tribe located at	Agency; that he l	eft the tribe abo	out(Ar	oproximate date	;
that the mother, (Name.)	,	was,) a (Degree.)	ndian of t	he	
Tribe located at	Agency, and left	the tribe about.	(Appro	ximate date.)	; that
the said child was born and reared he has attended the following scho		, and now actua			and that
NAME OF SCHOOL-PUBLIC, GOVERNMENT, OR MISSION.	LOCATED AT-	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	Cause of Discharge.	GRADE.
	*** (ESE)	(2.2)			
		3 43			
	<del></del>		*************	****************	
This 21 alday of No	U. 1911	manusain 1			
Two witnesses:		000	11 -	1	
. 1	1	(Parent	, guardian, or	next of kin.)	
Janes X 1	les , m	B 0 6	anl	iala	1
(NoteEvery blank in this application must		P. O., Licant, in his own handw	riting, if poss	ible. The signa	ture, whether
by mark or otherwise, must be stested by two witne	-/-				
	() AFFIDAVI	г.			
I,	, do h	ereby swear tha	t the stat	ements ma	de in the
above application are true.					
	(Sign	nature of applicant.)	(Parent, g	uardian, or nex	t of kin.)
Sworn to and subscribed befor	e me this day	of			, 191

(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,, a practicing physician of	
, do hereby certify that I have carefully examined	,
the child named in this application, and find that is in proper physical condition to at school, and is not afflicted with tuberculosis or other disease which would be a menace to the hof other pupils.	
This day of , 191	1. D.
Vouchers of Disinterested Persons.	
Voucher No. 1.	
I, , a (Business, calling, or profession.) , , do hereby certify that I am personally acquainted	
who makes the foregoing application; that I believe his s	tate-
ments therein are true; that I am acquainted with;	that
he is known and recognized in the community in which he lives as an Indian; that in my op	inion
he can not receive proper and adequate schooling at home for the reason that	
This day of 191	
Voucher No. 2.	A. The last
I,	of
, do hereby certify that I am personally acquainted	with
, who makes the foregoing application; that I believe his s	tate-
ments therein are true; that I am acquainted with;  (Name of child.)  he is known and recognized in the community in which he lives as an Indian; and that in my op	
he cannot receive proper and adequate schooling at home for the reason that	
This, 191	

#### Certificate of School Physician.

I hereby certify that on(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 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.

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.



### BRIEF.

APPLICATION OF FOR THE ENROLLMENT OF IN THE INDIAN SCHOOL AT CARLISLE, PENNSYLVANIA Date of enrollment, ) years. 🛎 Term of enrollment, NAME OF COLLECTING AGENT: Position,

### APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL

(For a child enrolled at an Agency.)

For and in consideration maintenance in the United St		0	e United	States assuming	Penn.	
of Maxie Lue (Name of child.  Digger (Tribe.)	<u> </u>	; Ma (Se	le;	late of birth /	March 31, 1889;	
NAME OF FATHER. (Both Indian and English.)	Living or Dead	TRIBE	-	BAND	DEGREE OF INDIAN BLOOD.	
Bob Luce	Living	Digg	er		Full	
Mary Luce	Diad	Digo	700		Full	
I, Rob June		, do h	ereby volu	ntarily consent	and agree to his	
enrollment in said school for the rules and regulations for The said child has been e	a period of			and also oblig	ate myself to abide by all	
NAME OF SCHOOL.	DATE OF ENROLLMENT.	DATE OF DISCHARGE.		CAUSE.	GRADE.	
nashille 0	Public	Scho	ol.	ad Plant Rod	2 -	
Stew Carson	- Inc	lian	Scho	ol 340	ur. 7th	
'	urolla	went to	as .	expire	۷_	
Bol Lice - Im. C. (Pagent, guardian, or next of kin.) Per. D. M. C.						
Two witnesses:		P. O. address	: She	ngle &	brings	
Due Culler					cystones	

#### PHYSICIAN'S CERTIFICATE.

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

1. 1

Physician at

#### CERTIFICATE OF AGENT OR BONDED SUPERINTENDENT.

This young

day of\_

belongs

to no

Agent or Superintendent.

#### 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,

#### NOTE

Age limits, fourteen to twenty years. Preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit will be given consideration. An industrial course only can be taken and the term reduced to three years, in exceptional cases.

Maxie suce has only a stepfather who takes no authority over him Heacels entirely forhimself. We would like to have him at Stewart for another 3 years, but he wants to come to Carlisle He is a fine toy and we wish him to do what is best forthim.

#### 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.)

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 it; being changed to suit the case.

This form is to be used only in transfers from reservations or Indian schools to nonreservation schools.

Through a letter we learn of the death on the 22nd of February at his home in Elks Grove, Cal., of Maxie

Luce, a former Carlisle student. 913

653

### PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

(	f	m.		121	
NAME OF PUPIL	Juce	, raye	1	DATE / 3 19.0 8	
AGE / YEARS   RI	New   STU	DENT. TRIBE	ger	DATE 73 1908 STATE Caly	
DEGREE OF INDIAN BI	LOOD				
Inspection To o	d de	relapme	ut.		
		/			
Sı	_ 0				
PALPATATION NO			************		
PERCUSSION M	ormal	· · · · · · · · · · · · · · · · · · ·			
CPress	NA NOE				
Auscultation	W-	mal			
7					
HEART SOUNDS	our	***************************************			
MENSURATION (INSP.	37		214	PULSE 86	
MENSURATION (EXP.	32	RESPIRATION	27	PULSE 86	
				WEIGH 42 1/4 LBS.	
TEMPERATURE 9	degs.	. HEIGHTFT	IN.	WEIGHT LBS.	
	. 0	Vaccination	e od	12708	
FAMILY HISTORY:	1		In a l		
	Living.		Dead.	Cause of death.	
FATHER	yes	good.			
MOTHER	0	0	yes 9	nsumption	
(			Ψ	/	
BROTHERS	***************************************			would	(
(			1 0	baces follow	-
SISTERS					
SISTERS			1	(	
PERSONAL HISTORY:	21 ,	1 , - ( )	6	1	
2,	Joon	health for	rpa	er year.	
		V		V	
REMARKS:					
***************************************		***************************************			

(over)

EXAMINATION FOR OUTING:  Dates: Conditions:  April 20, 1919 They 10 1910	EXAMINATION FOR OUTING:  DATES:  Conditions:  April 20, 1909  Thay 10 / 9/0	Hospital Record					
EXAMINATION FOR OUTING:  Dates: Conditions:  April 20, 1909 They 10 /9/0	EXAMINATION FOR OUTING:  DATES:  Conditions:  April 20, 1909  Thay 10 / 9/0						
EXAMINATION FOR OUTING:  Dates: Conditions:  April 20, 1909 They 10 /9/0	EXAMINATION FOR OUTING:  DATES:  Conditions:  April 20, 1909  Thay 10 / 9/0						
EXAMINATION FOR OUTING:  Dates: Conditions:  April 20, 1909 They 10 /9/0	EXAMINATION FOR OUTING:  DATES:  Conditions:  April 20, 1909  Thay 10 / 9/0						
EXAMINATION FOR OUTING:  Dates: Conditions:  April 20, 1909 They 10 /9/0	EXAMINATION FOR OUTING:  DATES:  Conditions:  April 20, 1909  Thay 10 / 9/0						
EXAMINATION FOR OUTING:  Dates: Conditions:  Afril 20, 1909 Thay 10 1910	EXAMINATION FOR OUTING:  Dates: Conditions:  Afril 20, 1909 Thay 10 1910						
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EXAMINATION FOR OUTING:  Dates: Conditions:  Afril 20, 1909 Thay 10 1910	EXAMINATION FOR OUTING:  Dates: Conditions:  Afril 20, 1909 Thay 10 1910						
EXAMINATION FOR OUTING:  Dates: Conditions:  Afril 20, 1909 Thay 10 1910	EXAMINATION FOR OUTING:  Dates: Conditions:  Afril 20, 1909 Thay 10 1910						
EXAMINATION FOR OUTING:  Dates: Conditions:  Afril 20, 1909 Thay 10 1910	EXAMINATION FOR OUTING:  Dates: Conditions:  Afril 20, 1909 Thay 10 1910						
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DATES: CONDITIONS:  afril 20, 1909 They 10 1910	DATES: CONDITIONS:  Afril 20, 1909 They 10 1910						
april 20, 1909 May 10 1910  They 10 1910	afril 20, 1909 They 10 1910 They 10 1910	EXAMINATION FOR OUTING:					
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Son		Luce 38	08	San S Male.
Tribe Full			40000 =	Sex { Male. Female.
Age 24	0 0		7	ondition of, Eyes Q and
Height 5	/		~	Ears Q odd
Weight 12	- /.	mensuration s	4	Throat Langut:
Temperature		Vaccination 4 res	<b>.</b>	Cervical glands nuteularge
Pulse		Vision good		Skin good condition
	///	in implemed		
		Fremilia.		A
Percussion	nellnes	sover left	une i	at a gray.
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	this	7	4	
Heart W	m	2		
(Menstruation)	,			
		FAMILY HISTOR	Y.	
	LIVING.	FAMILY HISTOR CONDITION OF HEALTH.	Y. DEAD.	CAUSE OF DEATH.
Father	LIVING.		The second	CAUSE OF DEATH.
Father	LIVING.		The second	CAUSE OF DEATH.  Benefity Unknown, hat J. 13
Mother	LIVING.		The second	Benilty
Mother	0	CONDITION OF HEALTH.	DEAD.	Benilty Unknown hat J. B accidental deals
Mother	0	CONDITION OF HEALTH.	DEAD.	Benilty Unknown hat J. B accidental deals
Mother	0	CONDITION OF HEALTH.	DEAD.	Benilty Unknown, het J.B. accidental dealt
Mother	0	CONDITION OF HEALTH.	DEAD.	Benilty Unknown, het J.B. accidental dealt
Mother	0	CONDITION OF HEALTH.	DEAD.	Benilty Unknown hat J. B accidental deals
Mother  Brothers  Sisters  Personal history	\$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CONDITION OF HEALTH.	DEAD.	Benilty Unknown, het J.B. accidental dealt Denfancy.
Mother  Brothers  Sisters  Personal history	\$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CONDITION OF HEALTH.	DEAD.	Benilty Unknown, het J.B. accidental dealt Denfancy.
Mother  Brothers  Sisters  Personal history	\$ 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	CONDITION OF HEALTH.	DEAD.	Benilty Unknown, het J.B. accidental dealt

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.

Name	
TA CELLEC	

 Age
 Sex  $\left\{ {\substack{Male. \\ Female.}} \right\}$  Tribe  $\left\{ {\substack{Full \\ I/}} \right\}$  Residence

(On ....., 19\_\_\_)

DATE.	SYMPTOMS.			TREATMENT.	DIAGNOSIS.	REMARKS.	
19	T.	P.	R.			History, progress, and termination of the disease.	
Pi I							
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TY							
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		CATALOG S			di di		

Elk Grove al mare 1 st. 13. Carlisle Students. you of me. maxie duce:s dealh og she 22 nd. inst. of 7 Ebry. He was a beloved. young man of all his Jolks and all who kuw him. Ité always spoke so well of Carlisle and at that you would be interested and woulk like to know. It's leaves to mourn his loss an aged aunt and cousin of mis. M. J. Roberto, of where he passed away. It was nece

At was 25 years

mo: 25 days. Respectively Mors. m. J. Roberts Elk Grove Cal. R. F.D. bx 60.

March 11, 1913.

Mrs. M. J. Roberts,

Elk Grove, Cal.

R. F. D. Box 60.

Dear Friend:

I wish to thank you for the information contained in your letter of the lst inst. I am sorry to learn of Maxie's death. His record was good here and the school is always proud of its good pupils. I am glad to know that he had good care while with you. Again thanking you, I am Yours very truly,

Superintendent.

LaF/GIL

# Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

	May 3/ 1911.
NA	ME maje Luce.
1.	Are you married and if so to whom? No - Jam not married
2.	What is your present address? Lashisle, Pa.
3.	Did you attend or graduate from any other schools after leaving Carlisle? The Give names of
sch	nools and dates if possible
4.	What is your present occupation? Plumbing and steam fitting
5.	Tell something of your present home
6.	What property in the way of land, stock, buildings, or money do you have? I have
	no land, stock, or building; and the amount of money I have is not a great sum
7.	Have you been in the Indian Service? In what positions? How long in each? No-I have not been in no Indian Service.

8. What other positions have you held since leaving Carlisle?	7-
9. Tell me anything else of interest connected with your life:	MUAN

Luce, Maxie 5731 Correspondence Ex-student 3; 3733

Weekly R	Report Week Ending	
CREDITS	Mas evel in des	DEMERITS
	Obedience to requests of physician	
	Moral conduct after all allack	9
	Manly conduct and gentlemanly manners bleusisa, but	X
	Cleanliness of person Rightly improve	el .
	Neatness in dress	
	General observance of sanitary laws and sanitary regulations	
	Exercise	
School rep	ort V	
Progress in	John Mille	y Physician
rokm 4-2	1	

	Report Blank—Boys  Fort Lapwai Sanitorium Fort Lapwai, Idaho
	Report Week Ending Old bes 19th 1912
CREDITS	Mas has during the DEMERITS
	Obedience to requests of physician week had an aquele
	Moral conduct allack Ablenning but is
	Manly conduct and gentlemanly manners unburning, and is
	Cleanliness of person his fine good Batteen &
	Neatness in dress Oelf- Mare very fond of
	General observance of sanitary laws and sanitary regulations. Made to the sanitary laws and sanitary regulations.
	Exercise generally good influence.
School rep	ort V all of the Though.
Progress in	n health See above
FORM 4-2	Stry Helley, Physician

Weekly Report Bland Fust Honols

Name

Report Week Ending

DEMERITS

Report Week Ending

DEMERITS

CREDITS		DEMERITS
990/0	Obedience to requests of physician	
	Moral conduct	
980%	Manly conduct and gentlemanly manners	
1990/0	Cleanliness of person	
990/0	Neatness in dress	
9840	General observance of sanitary laws and sanitary regulations	
990%	Exercise	

School report 1 st allender q

Progress in health Mer

1. 1. 1601

Ch Physician

FORM 4-2000-4-12

Weekly Report Blank Boys Distinguished Labwai Sanitorium t Lapwai, Idaho Report Week Ending CREDITS DEMERITS Obedience to requests of physician Moral conduct Manly conduct and gentlemanly manners Cleanliness of person General observance of sanitary laws and sanitary regulations. School report..... Progress in health .... FORM 4-2000-4-12

				65	3	of a				B	N. W.	
NAME.				TRI	BE.			PA	RENT OR GU			
Luce, I	Maxi	е.		Di	gger.				Bob I		(Fath	er).
DATE ENRULLED.			TERM.	S		1	AGE.	HC	ME ADDRES	S.		
Nov.	15,	1907		3 Ye	ars.		18		Shing	gle S	pring	s, Cal.
DATE OF RECORD ACADEMIC DEPARTMENT OF RECORD			ENT. INDUSTRIAL DEPARTMENT.			DORMITORY.			OUT	ING	SPECIAL REMARKS.	
DATE OF RECORD	ROOM NO.	Scholarship	Conduct,	Shop.	Ability.	Conduct	t Room Neat		s   Conduct	Ability.	Conduct.	
aprios.	8	W. Good	Ex.							Good	Good.	
Jan. 09	9	V. Good	Ex	Hosp.	V. Frod	Ex	Hosp.	D. 400	1 V. groo	Frod	Good	
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gan:10	10	V. Good	Ex C	Hum	b- 11	4000	10	V.9	24	Good	Good	
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Name./	Max Luce September 28	Fort Lapwai, Idaho
CREDITS	8	DEMERIT
987	Obedience to requests of physician	Nous
994	Moral conduct	
994	Manly conduct and gentlemanly manners	
1009	Cleanliness of person	
1000	Neatness in dress	
1000	General observance of sanitary laws and sanitary regulations	
1000	Exercise	
	port Notallending	

Oct. 7th, 1912.

Dr. John W. Alley. Supt., Fort Lapwai Sanatorium, Lapwai, Idaho.

My dear Dr. Alley:

This is to acknowledge receipt of the report submitted me in regard to Maxie Luce and to thank you for the same. It is gratifying to know that Maxie is regaining his former strength and that he is proving himself to be the same splendid young man he was during all the time he was with us here. It would be appreciated if other reports can be sent to me from time to time.

Will you kindly remember me to Maxie and express to him my kindest regards and best wishes for continued improvement.

Very truly yours,

Y AND E' ROCH.

441037 3M-4-09

Maxie Luce,

PRESENT NAME

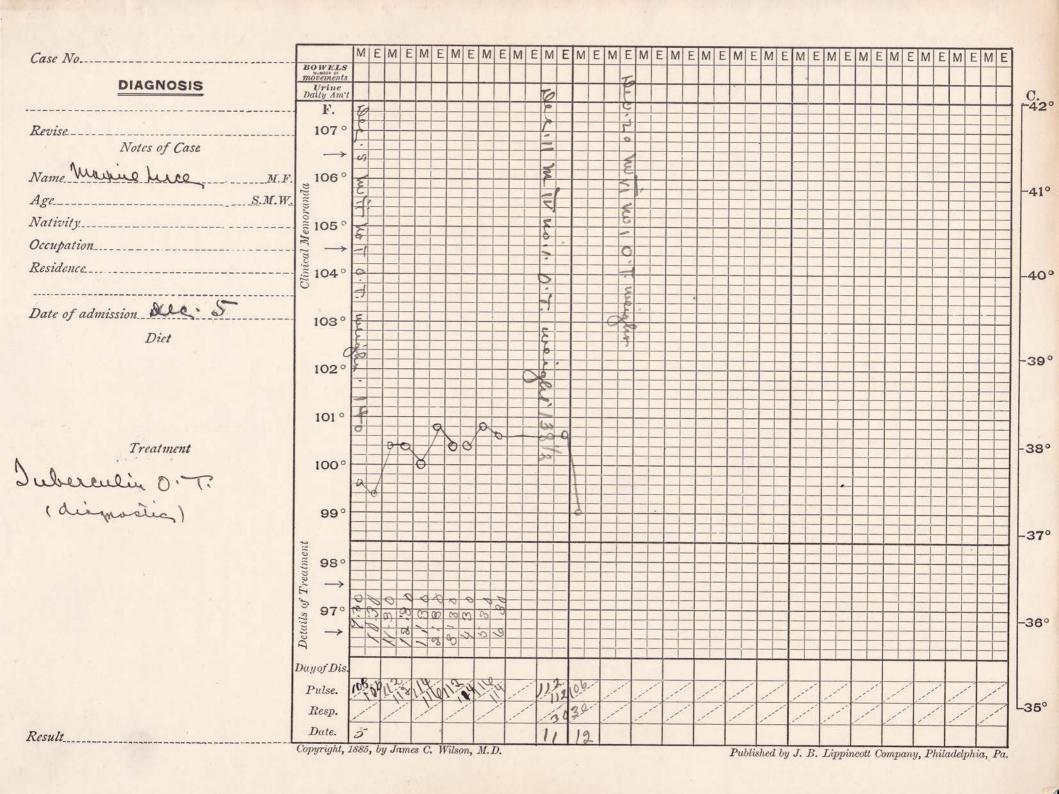
PRESENT NAME											
DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE						
1911.		Carliste Pa.	Plumber	Steam Litter.							
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#### OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

Name of Student Home Address Tribe																	
											WAREL OF						
Age at Entrance	Date of Entrance S	Shop			JAN.	FEB.	MAR.	APR.	MAY	JUNE	JULY	AUG,	SEPT.	OCT.	NOV.	DEC.	TOTAL OR AVERAGE
Patron *		Locality	y	Days in School													
Address		R. R. Stati	on	Conduct													
Recommended by		G	rade in School	Ability													
Grade of Home	Church			Health													
Date of Outing	Date Returned V	Wages		Earnings								-10					
																	200
			*														
			*														
						ME	7.0										74.589
												Tes					
													R				

### TRADE RECORD, CARLISLE.

11	Jan. 1, 19/0 to June 30, 19/0
PUPIL Maxie Lu	2 -
TRADE Steam-fill	ing + Plumbing
ABILITY Eacelless -	
CONDUCT Good	
	is how in country.
INSTRUCTOR A J. W.	her
	ber how in country.



## United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR / 912.

FULL. ONE..... TRIBE. NAME Maxie Luce. DIAGNOSIS Interculous ADMITTED Dee 1 DISCHARGED Afr 6 VISITING PHYSICIAN: RESIDENT PHYSICIAN: a Rallin REMARKS: Sent to Isoverment candom Del Delaho.