5735

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER	ENGLISH NAME	AGENCY	NATION
3076.	Priscilla Madison		Blue Hill Mashpee

BAND	INDIAN NAME	HOME ADDRESS
		Lottie E. Hopkins, Gay Head, Mass.

PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EPXR.	SEX.
FATHER, D	MOTHER, D	5/6	18	5' 1½"	107	31	29	F

ARRIVED AT SCHOOL	FOR WHAT PERIOD	DATE DISCHARGED	CAUSE OF DISCHARGE
Dec. 29, 1909	Five Years	June 25, 1911	Poor health

TO COUNTRY	PATRONS NAME AND ADDRESS	FROM COUNTRY
5-17-'11	Mrs. Daniel Doner R.F.D. #9, Carlisle, Pa.	5-23-'11

THE SHAW-WALKER CO., MUSKEGON. 79104

Months in school before Carlisle, 36
Pub. Sch. Gay Head - '97-'04

Grade entered at Carlisle, 4th

Grade at date of Discharge,

Trade or Industry,

Church Presbyterian

miles to sch.

1649

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

NUMBER	ENGLISH NAME	AGENCY	NATION
3076	Priscilla Madison		Mashpee (Blue Hill)

BAND	INDIAN NAME	HOME ADDRESS
		Lottie E. Hodgkins, Gay Head, Mass.

PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXP.	SEX.
FATHER	MOTHER							
Dead	Dead	5/6 ? ?	18	5-1½	107	31	29	F

ARRIVED AT SCHOOL	FOR WHAT PERIOD	DATE OF DISCHARGE	CAUSE OF DISCHARGE
Dec. 29, 1909	5 years	June 25, 1911	Poor health

MONTHS IN SCHOOL BEFORE CARLISLE	GRADE ENTERED	GRADE AT DATE OF DISCHARGE	TRADE OR INDUSTRY	CHURCH	MILES TO SCHOOL
36	4th			Presbyterian	

TO COUNTRY	PATRONS' NAME AND ADDRESS	FROM COUNTRY
5-17-11	Mrs. Daniel Doner, R. F. D. #9, Carlisle, Pa.	5-23-11

1649

NAME. Priscilla Madison | TRIBE. Mashpee | PARENT OR GUARDIAN.

DATE ENROLLED. Dec. 29, 1909. | TERM. Five Years. | AGE. 18 | HOME ADDRESS Lottie E. Haskins, Gay Head, Mass.

DATE OF RECORD	ACADEMIC DEPARTMENT.			INDUSTRIAL DEPARTMENT.			DORMITORY.			OUTING		SPECIAL REMARKS.
	ROOM NO.	Scholarship	Conduct.	Shop.	Ability.	Conduct.	Room No.	Neatness	Conduct.	Ability.	Conduct	
Jan. '10	4½	V. Good	Ex	Gen.	Med.	V. Gd	1	Good	Ex			
July '10	5½	V. Good	Ex.	Sew	V. Gd	"		V. Gd	"			
Jan. '11				Hosp.								
July 11	6	Hosp										

1649

BRIEF.

Application of

FOR THE ENROLLMENT OF

Priscilla W. Madison

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST OFFICE ADDRESS OF APPLICANT:

Date of enrollment, , 190

Term of enrollment, Five (5) years

Application for Enrollment in a Nonreservation School.

(For a child not enrolled at an Agency.)

For and in consideration of the United States assuming the care, education, and maintenance in the United States Indian School at Carlisle, of Priscilla W. Madison (Name of child.) (Sex.), I, Lottie E. Haskins (Parent, guardian, or next of kin.) of Gay Head P. O., State of Mass, do hereby voluntarily consent and agree to My enrollment in said school for a period of five (Not less than 3.) years, and also obligate and bind myself to abide by all the rules and regulations for Indian schools.

I further say that ~~the said child~~ was born at Gay Head on Mar. 5 1891 (Date.) that the father, Charles B. Madison (Name of father.) was (Is or was.) a 3/4 (Degree.) Indian of the Blue Hills Tribe located at Gay Head Agency; that he ~~left~~ died in the tribe about Aug. 6. 1904 (Approximate date.); that the mother, Louisa A. Madison (Name.) a full (Is or was.) (Degree.) Indian of the Blue Hills Tribe located at Gay Head Agency, and ~~left~~ died in the tribe about Dec. 23 1894 (Approximate date.) that the said child was born and reared in the United States, and now actually resides therein; and that he has attended the following schools:

NAME OF SCHOOL—PUBLIC, GOVERNMENT, OR MISSION.	LOCATED AT—	DATE OF ENROLLMENT.	DATE OF DISCHARGE.	CAUSE OF DISCHARGE.	GRADE.
Public School	Gay Head	1897	1904		Ungraded

This 6th day of October, 1909

Two witnesses:

Chas N. Richmond

Wm E Spooner.

Lottie E. Haskins.
~~(Parent, guardian, or~~ next of kin.)

P. O.,

(NOTE.—Every blank in this application must be properly filled out by the applicant, in his own handwriting, if possible. The signature, whether by mark or otherwise, must be attested by two witnesses.)

AFFIDAVIT.

I, Lottie E. Haskins, do hereby swear that the statements made in the above application are true.

Lottie E. Haskins.
(Signature of applicant.) ~~(Parent, guardian, or~~ next of kin.)

Sworn to and subscribed before me this 6th day of October, 1909

Chas N. Richmond.
~~Notary Public~~

(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, Rebecca Ross, a practicing physician of New Bedford Mass, do hereby certify that I have carefully examined Priscilla Madison, the child named in this application, and find that She is in proper physical condition to attend school, and is not afflicted with tuberculosis or other disease which would be a menace to the health of other pupils.

This 21 day of October, 1909 Rebecca Ross, M. D.

Vouchers of Disinterested Persons.

VOUCHER NO. 1.

I, Elwyn G. Campbell, a teacher (Business, calling, or profession.), of New Bedford, Mass., do hereby certify that I am personally acquainted with Priscilla Madison who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Priscilla Madison (Name of Child.); that She is known and recognized in the community in which she lives as an Indian; that in my opinion She can not receive proper and adequate schooling at home for the reason that she is unable to do the work as rapidly as the white children.

This 19th day of October 1909 Elwyn G. Campbell.

VOUCHER NO. 2.

I, Henry E. Brightman, a Pilot State Commonwealth (Business, calling, or profession.) of Fall River Mass, do hereby certify that I am personally acquainted with Priscilla W. Madison, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Priscilla W Madison (Name of child.); that S he is known and recognized in the community in which S he lives as an Indian; and that in my opinion S he cannot receive proper and adequate schooling at home for the reason that the Schools are ungraded

This 21 st day of October, 1909

Henry E. Brightman

Certificate of School Physician.

I hereby certify that on ....., I made a careful examination
(As soon after arrival as possible.)

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 ....., 190.....

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.

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Priscilla Madison DATE Mar 14 19 10

AGE 18 YEARS { NEW / RETURNED } STUDENT. TRIBE Chukchi STATE Mass

DEGREE OF INDIAN BLOOD 3/4

INSPECTION Small and large gland on right side of neck. Fair development

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE Normal / RESP. MURMUR Normal }

HEART SOUNDS Normal

MENSURATION { INSP. 31 1/2 / EXP. 29 } RESPIRATION 24 PULSE 92

TEMPERATURE 98 degs. HEIGHT 5 FT 1 1/4 IN. WEIGHT 108 LBS.

VISION 10/10 VACCINATION Good

MENSTRUATION Regular

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER			Yes	
MOTHER			Yes	?
BROTHERS	1	good		
			1	Traumatism
SISTERS				

PERSONAL HISTORY:

REMARKS:

(over)

HOSPITAL RECORD

EXAMINATION FOR OUTING:

DATES:	CONDITION:
Mch. 14 - 1910	Good

379 Cannidy St
New Bedford Mass
Jan 20. 12

Dear Mr. Allen.

Priscilla passed away very peacefully at 8:30 Friday Evening. She was in a happy frame of mind and was taking up to a few minutes of her death she just gasped and went away. She has been ready for a long long time

Respectfully
Lyman Madison

379 County St.,
New Bedford, Mass
Jan. 20, 12

Supt. Friedman.
Indian School.
Carlisle, Pa.

Hear Sir
Priscilla passed away very peacefully last Evening Jan 19, 12. I will have her body remain in the Lamb until May and then I will take her home.

Respectfully
Lyman Madison.

'Y AND E'' ROCH. 1649.

REPORT AFTER LEAVING CARLISLE

563757 3M-2-11

NAME AT CARLISLE Priscilla Madison

PRESENT NAME

DATE	INFORMATION THROUGH	ADDRESS	OCCUPATION	ITEMS OF INTEREST	GRADE
	Lyman	c/o Lyman Madison 379 County St New Bedford. Mass.			