

2374 In a letter to a friend, Elizabeth Lamieux, former student, announces her marriage on November twenty-third, to Mr. James Northrup.

19 Elizabeth Lemeaux writes from her home in Minnesota that she is kept very busy helping her mother with household affairs. Carlisle, with all its pleasures, is never forgotten.

5785

SHAW-WALKER MUSKEGON 5478

Church, Catholic
miles to sch.

2327

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Lemieux, Eliz. DATE 12/7 1908AGE 18 YEARS { NEW } STUDENT. TRIBE Chippewa STATE Minn.

DEGREE OF INDIAN BLOOD.....

INSPECTION Good developmentPALPATION NormalPERCUSSION NormalAUSCULTATION { RESONANCE.....
RESP. MURMUR Normal

HEART SOUNDS.....

MENSURATION { INSP. 31
EXP. 28 RESPIRATION 21 PULSE 86TEMPERATURE 97 degs. HEIGHT 5 FT. IN. WEIGHT 124 LBS.VISION 19/20 with glasses VACCINATION good Rev. 12/21/08MENSTRUATION Normal

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER.....			yes	Heart trouble
MOTHER.....	yes	Poor		
BROTHERS {	3	good		
			2	?
SISTERS {	1	good		

PERSONAL HISTORY:

Has had cough for one month
and lost 4 lbs.

REMARKS:

(over)

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:	CONDITIONS:
April 26-09	Good

Reenrolled:

BRIEF.

Application of

Elizabeth Zemeaux

FOR THE ENROLLMENT OF

herself

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST-OFFICE ADDRESS OF APPLICANT:

Bellevue, Minn.

Date of enrollment, *May 23*, 191 *0*

Term of enrollment, *Three* (*3*) 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, Pa., of Elizabeth Lemeaux, I, Eliz. Lemeaux, of Bloquet P. O., State of Minn., do hereby voluntarily consent and agree to my enrollment in said school for a period of three 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 _____ on _____; (Date.)
that the father, _____, a _____ Indian of the _____ (Name of father.) (Is or was.) (Degree.)
Tribe located at _____ Agency; that he left the tribe about _____; (Approximate date.)
that the mother, _____, a _____ Indian of the _____ (Name.) (Is or was.) (Degree.)
Tribe located at _____ Agency, and left the tribe about _____; that (Approximate date.)
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.

This 23rd day of May, 1910
Two witnesses:

Harvey K. Meyer

Elizabeth Lemeaux
(Parent, guardian, or next of kin.)
P. O. Bloquet, Minn.

(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, _____, do hereby swear that the statements made in the above application are true.

(Signature of applicant.)

(Parent, guardian, or next of kin.)

Sworn to and subscribed before me this _____ day of _____, 1910

(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 attend school, and is not afflicted with tuberculosis or other disease which would be a menace to the health of other pupils.

This _____ day of _____, 191_____

_____, M. D.

Vouchers of Disinterested Persons.

VOUCHER No. 1.

I, _____, a _____, of _____
(Business, calling, or profession.)

_____, do hereby certify that I am personally acquainted with _____ who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with _____; that
(Name of Child.)
he is known and recognized in the community in which he lives as an Indian; that in my opinion he can not receive proper and adequate schooling at home for the reason that _____

This _____ day of _____, 191_____

VOUCHER No. 2.

I, _____, a _____, of _____
(Business, calling, or profession.)

_____, do hereby certify that I am personally acquainted with _____, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with _____; that
(Name of child.)
he is known and recognized in the community in which he lives as an Indian; and that in my opinion he cannot receive proper and adequate schooling at home for the reason that _____

This _____ day of _____, 191_____

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 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 non-reservation 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.



CONSENT OF

FOR THE ENROLLMENT OF

IN THE INDIAN SCHOOL AT

For the term of _____ years

Name of agency or place from which pupil came:

Date of enrollment, _____ 190_____

Date of discharge, _____ 190_____

Cause of discharge, _____ 190_____

CONSENT BLANK

PHYSICIAN'S CERTIFICATE

AGENTS OR SUPERINTENDENTS INDORSEMENT

2327

APPLICATION FOR ENROLLMENT IN A NON-RESERVATION SCHOOL

Full name of child Lizzie Lemieux Indian name is _____
Name of Father Ans Lemieux
Name of mother Julia Coffey Tribe Chippewa
Reservation Bad River Degree of Indian blood of child half
Is either parent white, if so, which? No Are either or both allotted? No
On what reservation? _____ Age of child 15 What
reservation school attended? Bayfield Catholic How long? 5
If ever enrolled in a nonreservation school, name of school, _____
When? _____ How long? _____ If ever
dismissed from a school, where, No; when, _____
and for what reason? _____
(Signed.) Lizzie Lemieux

NOTE—The above blank to be signed by the child, if old enough to understand its import; if not, by the parent, guardian or other person cognizant of the facts

CONSENT BLANK

I, Mrs. Julia Coffey, parent, guardian or next of kin of the
above-name child, Lizzie Lemieux, do hereby consent to the
transfer or enrollment for a period of five (5) years in the Indian School at Carlisle, Pa.
Dated at Odawa Mich on the 2nd
day of Sept, 1905.
(Signed.) Mrs. Julia Coffey
(Parent, Guardian or next of kin.)

PHYSICIAN'S CERTIFICATE

I hereby certify that I have personally examined the above-named Lizzie Lemieux
and have found her physically sound, and recommend
the transfer so far as her health conditions are concerned. Dated at Odawa Mich
on the Second day of Sept, 1905.
(Signed.) J. M. Meyer M.D.

AGENT'S OR SUPERINTENDENT'S INDORSEMENT

The statments concerning the above-named Lizzie Lemieux are be-
lieved by me to be correct, and I hereby recommend the transfer.
(Signed.) J. W. Campbell
U. S. Indian Agent or Superintendent

NOTE—Age limits, twelve to twenty years. preferably fourteen to eighteen. Students must be at least one-fourth Indian, preferably full Indian. Special cases beyond the age limit can be given consideration.

Card made

Cloquet Minn.
Nov 30 1915

Dear Friend.

Just a few lines today
Say Elizabeth L Northrup
died in Friday Nov 19. 1915
The deceased is surried by
her husband James Northrup
two children a son aged 4—
months and daughter 3 aged
year. The

Please don't send
them Carlisle arrom
anyone.

James Northrup
Cloquet Minn
Box 65

2327

Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

- NAME Elizabeth L. Northrup. June 20 1911.
1. Are you married and if so to whom? James Northrup.
2. What is your present address? Cloquet Minn., Box 34.
3. Did you attend or graduate from any other schools after leaving Carlisle? no Give names of schools and dates if possible
4. What is your present occupation? Housekeeping.
5. Tell something of your present home
6. What property in the way of land, stock, buildings, or money do you have? none.
7. Have you been in the Indian Service? In what positions? How long in each? no.

8. What other positions have you held since leaving Carlisle? none

9. Tell me anything else of interest connected with your life:

Record of Graduates and Returned Students,

U. S. INDIAN SCHOOL, CARLISLE, PA.

232
NAME Elizabeth Lemieux Northrup July 2 1912

1. Are you married and if so to whom? yes

James Northrup

2. What is your present address? Cloquet Minn Box 34

3. Did you attend or graduate from any other schools after leaving Carlisle? no Give names of schools and dates if possible

4. What is your present occupation? Housekeeping

5. Tell something of your present home

6. What property in the way of land, stock, buildings, or money do you have? none
only my husband has land and money in Indian office.

7. Have you been in the Indian Service? In what positions? How long in each? no

8. What other positions have you held since leaving Carlisle?

9. Tell me anything else of interest connected with your life:

1. Are you married and if so to whom?

2. What is your present address?

3. Did you attend or graduate from any other schools after leaving Carlisle? Give names of

schools and dates if possible

4. What is your present occupation?

5. Tell something of your present home

6. What property in the way of land, stock, buildings, or money do you have?

7. Have you been in the Indian Service? In what positions? How long in each?

I

Cloquet Minn
July 2, 1912

Dear Schoolfather

Just a line
to say that I am
enjoying life but think
of Carlisle often and
regret that I left so
soon. But it is too late
now.

Have been so busy
lately that I never
hardly have time to
answer letters.

I would have went

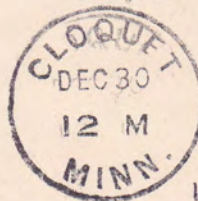
the commencement
but to the misfortune
in our family in losing
our little baby boy
I did not feel in going
any place just then!

The people up here
will soon be picking
blue berries up here
now and there will
many of them this year
It will be fourth of
July soon - and I
hope the children
will enjoy themselves
heartily.

will close sending my
love and best wishes to
all. Good bye.

As ever
Elizabeth Northrup.

Department of the Interior.

*Mr. M. Friedman**Supt. U. S. Indian School**Carlisle**Pennsylvania*

G-3305

2327

Dec. 29, 191*2*

Name

Elizabeth Lemieux Northrup.

(Please give name by which enrolled and also present or married name.)

Tribe

Chippewa.

Present Address

Cloquet Minn.

Former Address

Cloquet Minn.

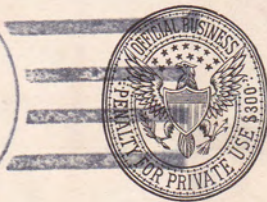
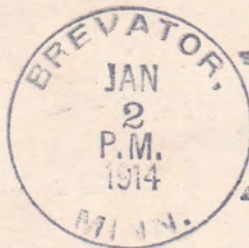
(Address from which we heard from you last.)

Present Occupation

Housekeeping.

Remarks:

Department of the Interior.

*Mr. M. Friedman**Supt. U. S. Indian School**Carlisle**Pennsylvania*

6-3305

2377

Jan 2

, 1914

Name

Elizabeth Lemieux Northrup

(Please give name by which enrolled and also present or married name.)

Tribe

Chippewa

Present Address

Cloquet

Former Address

Cloquet

(Address from which we heard from you last.)

Present Occupation

Housekeeper.

Remarks:

2237
July 16th, 1910

Miss Elizabeth Lemiaux,
Cloquett, Minn., (Box 34)

Dear Elizabeth,

I have your interesting letter of the 12th, and
am enclosing you check herewith for \$28.18 closing your account.
Remember to sign the check before presenting for payment.

Your friend,

W.H.M.

Superintendent,

redman:-
chud. School.

Carbide Pa.

Dear Sir:-

I write to
ask you today if you
could send the balance
of my money which
is 28.16 I need it very
bad, I guess why
they did not send it
by this time is because
I enrolled my self
for three more years
but found it unnecessary
for me to return as
my mother is often
sick and besides
they are many of us
small children.

I would be much
oblige if you could
send the money

return

As your old pupil
Elizabeth Lennan
Cloquet
Maine

Box 307

64

Name Lemieux, Lizzie

5785

Age 20

Deg. Ind. blood 1/2

Address Bayfield, Wis/

Present Address. Superior, Wisconsin.

Information from Carlisle

Date June 6, 1910

State Wis. Agency La Pointe

Tribe Chippewa

POSITIONS FOR WHICH LISTED. SUITABILITY IN ORDER NAMED.

- | | |
|-----------------|---------------------|
| 1. House work | 2. Laundry |
| 3. Plain Sewing | 4. Ass't in Cooking |

Remarks: ex housekeeper.

2327

Elizabeth Lemieux

Mrs. James Northrup

2327

NAME.

TRIBE.

PARENT OR GUARDIAN.

Lemeaux, Lizzie.

Chippewa.

Julia Coffey.

DATE ENROLLED.

TERM.

AGE.

HOME ADDRESS.

Sept. 4, 1905.

15.

Bayfield, Wis..

SPECIAL REMARKS.

DATE OF RECORD

ACADEMIC DEPARTMENT.

INDUSTRIAL DEPARTMENT.

DORMITORY.

OUTING

ROOM
NO.

Scholarship

Conduct.

Shop.

Ability.

Conduct.

Room
NO.

Neatness

Conduct

Ability.

Conduct.

Apr. '08

6

V. Good

Ex

Jan. '09

7

V. Good

Ex

July '09

8

V. Good

V. Good

Jan. '10

9

V. Good

Ex

July '10

9

V. Good

Ex

House
work

Good

Ex.

2-26

Ex.

Ex.

Fair

Good

V. "

V. Good

"

V. Good

"

"

Good

Ex

V. "

V. Good

Ex

Ex

"

"

Good

Ex

Home

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

172

Name of Student

Chig. Lineaux

Home Address

Julia Coffey, Bayfield, Wis. Tribe Chippewa

Age at Entrance

15

Date of Entrance

Sept. 4, 1905 Shop

1910 JAN.

FEB.

MAR.

APR.

MAY

JUNE

JULY

AUG.

SEPT.

OCT.

NOV.

DEC.

TOTAL OR AVERAGE

Patron

Priscilla Leeds

Locality

Town

Days in School

20 19 14 17 20 17 16 1/2

Address

Moorestown, N.J.

R. R. Station

Moorestown, N.J.

Conduct

4 4 4 4 Ex. Ex. Ex. Ex. Ex. Ex.

Recommended by

M. V. Gaither

Grade in School

Ability

Y. Y. Y. Y. Y. Y. Y. Y. Y. Y.

Grade of Home

Very Good

Church

Catholic

Health

U.G. U.G. U.G. Ex. Y. Y. Y. Y. Y. Y. Y.

Date of Outing

Apr. 30-1909

Date Returned

4-7-'10 Wages

Earnings

\$8 8

OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL

THE SPACE BELOW MAY BE USED FOR CORRESPONDENCE.



POSTAL CARD

THE SPACE BELOW IS FOR THE ADDRESS ONLY.

SUPT. M. FRIEDMAN,

U. S. Indian School,

CARLISLE, PA.

Dear Sir:-
I arrived home
all O.K. and my
parents were glad
to see me again.
I enjoyed my
trip but wish
I was back at
dear old Carlisle
again. Best
wishes to all.
As ever your old friend
Elizabeth Lemieux