

CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

5923

NUMBER 6047	ENGLISH NAME Bonie Carpenter	AGENCY	NATION Seneca				
BAND	INDIAN NAME	HOME ADDRESS (Moth.) Salina Carpenter, Basom, N. Y.					
PARENTS LIVING OR DEAD Both L.	BLOOD F	AGE 14	HEIGHT 5' 3 1/4	WEIGHT 106	FORCED INSP. 32	FORCED EXAM. 27	SEX M.
FATHER Cornelius Carpenter	MOTHER	ARRIVED AT SCHOOL Dec. 5, '09		FOR WHAT PERIOD Five Years	DATE DISCHARGED 9-15-'11	CAUSE OF DISCHARGE Desertion	
TO COUNTRY 4-6-'11	PATRONS NAME AND ADDRESS John W. Tindall, Robbinville, N. J. R.C.					FROM COUNTRY 8-15-'11	

THE SHAW-WALKER CO., HUBBARD, 79104

Months in school before Carlisle, 24

Dist. # 3 Basom 3rd Gr.

Tonawanda Res.

Grade entered at Carlisle, 1st

Grade at date of Discharge,

Trade or Industry,

Church, Presbyterian

Miles to sch. 1/2

DEPARTMENT OF THE INTERIOR,
INDIAN INDUSTRIAL SCHOOL,
Office of Superintendent,
CARLISLE, PA.

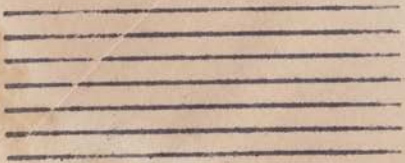
Died June 4, 1912



*Mr. Boni Carpenter
Salamanca*

N.Y.

No Supt. Weber



Carpenter Boni

5923

Mother's file & Father's file - Cornelius Carpenter 1539

3718

NAME. *Boni Carpenter Seneca.*

TRIBE.

PARENT OR GUARDIAN.

DATE ENROLLED. *Dec. 5, 1909.*

TERM. *Five Years.*

AGE. *14*

HOME ADDRESS *Mother's Salina Carpenter Basom, N. Y.*

DATE OF RECORD	ACADEMIC DEPARTMENT.			INDUSTRIAL DEPARTMENT.			DORMITORY.		OUTING		SPECIAL REMARKS.
	ROOM NO.	Scholarship	Conduct.	Shop.	Ability.	Conduct.	Room No.	Neatness	Conduct.	Ability.	

<i>Jan. 10</i>	<i>nor</i>	<i>U.S.</i>	<i>U.S.</i>	<i>Genl</i>	<i>g.</i>	<i>g.</i>	<i>14</i>	<i>Poor</i>	<i>g.</i>		
<i>July '10</i>	<i>n.</i>	<i>Ex.</i>	<i>g.</i>	<i>"</i>	<i>Fair</i>	<i>Fair</i>		<i>Good</i>	<i>Good</i>		
<i>Jan. '11</i>	<i>" 2</i>	<i>Good</i>	<i>Good</i>	<i>"</i>	<i>U.S.</i>	<i>U.S.</i>		<i>g.</i>	<i>g.</i>		
<i>July '11</i>	<i>nor 2</i>	<i>Good</i>	<i>Good</i>								
<i>Dec. '11</i>								<i>M.</i>	<i>g.</i>		

REPORT OF *Boni Carpenter* pupil of Carlisle Indian
 School, who went *7/6 1911* to live with *Jno. W. Tindall*
(Date) (Patron)
 of *Hamilton Sq.*
(Post Office) (County)
New Jersey, *Trenton N.J.* Railroad Station
(State)

Conduct *Good*
 Health *Good*
 Ability *Good*
 Cleanliness *Good*
 Economy *Very Good*
 Situation of Room *Upper floor*
 Condition of Room *Good*
 Condition of Clothing *Good*
 Wages *\$8 per month*
 Are careful accounts kept by patron? *yes*
 Are careful accounts kept by pupil? *No*
 Number of days at school *—*
 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? *Methodist*
 Distance to church *2 squares*
 Is there a Catholic church in locality? *No*

Who compose patron's family? *Man, wife and son.*
 What other help is employed? *None*
 Locality of home *In village, Hamilton Sq.*
 Home life and environments *Good*
 Trade at school *#*
 Nature of work *General farm work. Ind Land.*
 Pupil's age *15* Experience *None.*

Grade of home No 2.

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

Both pupil and patron seem to be satisfied and conditions are see good.

5/2, 1911

D.W. Dickey

Field Agent.

418

BRIEF.

Application of

Salina Carpenter

FOR THE ENROLLMENT OF

Bonnie Carpenter
Five years

IN THE INDIAN SCHOOL AT

Carlisle, Pennsylvania

POST OFFICE ADDRESS OF APPLICANT:

Salina Carpenter, Basom N.Y.

Date of enrollment, *November fourth*, 190*9*

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, Pa, of Boni Carpenter, male, I, Salina Carpenter of Barom P. O., State of New York, do hereby voluntarily consent and agree to this enrollment in said school for a period of five 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 Akron N.Y. on 1895; that the father, Cornelius Carpenter is a full Indian of the Seneca Tribe located at New York Agency; that he left the tribe about deceased; that the mother, Salina Carpenter is a full Indian of the Seneca Tribe located at New York Agency, and left the tribe about deceased; 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.
District no. 3 Tonawanda Res, New York.	Barom	unknown	Aug 29 ¹⁹		3 rd

This 4th day of November, 1909

Two witnesses:

Jerry Snyder.
Julia Parker.

Lu
Salina Carpenter
(Parent, guardian, or next of kin)

mark
P. O., Barom N.Y.

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, Salina Carpenter, do hereby swear that the statements made in the above application are true.

S. C.
(Signature of Applicant.)

Lu
Salina Carpenter
(Parent, guardian, or next of kin)

Sworn to and subscribed before me this 4th day of November, 1909.

J. C. Parker Justice of the Peace

(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.)



FOR NEW YORK PUPILS.

This blank is to be filled out and signed by a former teacher of the applicant, by a school trustee, a school superintendent, or by some other person conversant with the status of the applicant's school attendance.

This is to certify that Boni Carpenter
has attended the Tonawanda Reservation School at
Tonawanda Res. New York, from 19
to 19

Akron N. Y.

Nov. 6 1909.

This boy has no home and for that account did not attend regularly. Miss M. Palmer
It would be a very good thing for this boy to be in a school where he will have the proper training for the good manhood which is really in him. He cannot be given here because of no place to stay.

(Sign here.)

no home and is a wanderer from one place to another, and we as teachers never know where to find him.

This 5 day of November 1909

Fidelia G. Parker

VOUCHER No. 2

I Anna O. Holt, a Teacher of Akron, N. Y.
(Business, calling, or profession.)

, do hereby certify that I am personally acquainted with Salina Carpenter, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Boni Carpenter; 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

no one appears to be interested in him, and he has no home to go to.

This 5 day of November, 1909

Anna O. Holt

Certificate of Physician.

Albert E. Matt, a practicing physician of Akron, N. Y. do hereby certify that I have carefully examined Boni Carpenter, named in this application, and find that he 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 his pupils. This 5 day of November, 1909 Albert E. Matt, M. D.

Vouchers of Disinterested Persons.

VOUCHER No. 1.

Fidelia G. Parker, a Teacher of Akron, N. Y., do hereby certify that I am personally acquainted with Boni Carpenter who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Boni Carpenter; that he is known and recognized in the community in which he lives as an Indian; that in my opinion he cannot receive proper and adequate schooling at home for the reason that he has no home and is a wanderer from one place to another, and we as teachers never know where to find him. This 5 day of November 1909 Fidelia G. Parker.

VOUCHER No. 2.

Anna O. Holt, a Teacher of Akron, N. Y., do hereby certify that I am personally acquainted with Salina Carpenter who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Boni Carpenter; that 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 no one appears to be interested in him, and he has no home to go to. This 5 day of November, 1909 Anna O. Holt.

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 _____, 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

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.

PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Carpenter, Bonnie DATE Dec. 6 1909

AGE 14 YEARS NEW RESIDENT STUDENT. TRIBE Onondaga STATE New York

DEGREE OF INDIAN BLOOD Full

INSPECTION Poor development. Prominent scapulae

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE Normal
RESP. MURMUR Normal

HEART SOUNDS Normal

MENSURATION { INSP. 32
EXP. 29 1/2 RESPIRATION _____ PULSE 76

TEMPERATURE 98 6/10 degs. HEIGHT 5 FT 3 1/4 IN. WEIGHT 106 LBS.

VISION 10/10 VACCINATION Dec 6/09

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<u>yes</u>	<u>Good</u>		
MOTHER	<u>yes</u>	<u>Good</u>		
BROTHERS {	<u>2</u>	<u>Good</u>		
			<u>1</u>	<u>?</u>
SISTERS {	<u>3</u>	<u>Good</u>		
			<u>1</u>	<u>?</u>

PERSONAL HISTORY:

?

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITION:

3-13-1911

Good.

March 12, 1912

For Outing
O.K.

United States Indian School Hospital,

Carlisle, Pennsylvania.

YEAR 1912

TRIBE

FULL. ONE

NAME Bonnie Carpenter

AGE

DIAGNOSIS Acute nephritis

ADMITTED Apr 20

DISCHARGED May 13 Sent Home

RESULT Improved

VISITING PHYSICIAN:

RESIDENT PHYSICIAN:

A. R. Allen

H. B. Fraley

REMARKS:

Patient Barney Carpenter Carlisle, Pa., May 11 191... Physician _____
 Address _____ Nurse Pearl Bowers

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8:00				12:00	Buchu & Pot				
				8:00	" "	8:00	milk		
					" May 12				
8:00	98.2	68	28	8:00	Buchu & Pot				
				1:00	" "			10:00	ref. milk
				8:00	" "				
9:00	70	28		6:00	" "			3:00	milk
					" May 13				
8:00	97	66	26	8:00	Buchu + Pot				
				12:00	Buchu & Pot			3:00	not here
								4:00	not here.

Patient *Barney Carpenter*Carlisle, Pa., *May 7.*191 *2*

Physician

Address

Nurse

Pearl Bonser

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
				8:00	Buchm + Pot			20	Refused milk
					<i>May 8.</i>				
8:00	97.3	68	26	8:00	Buchm + Pot				
4:00	97	64	26	12:00	" "				
				3:00	" "				
					<i>May 9</i>				
8:00	97.3	72	30	8:00	Buchm + Pot				
4:00	97	64	28	12:00	Buch & Pot.				
				3:00	" "				
				6:00	" "				
				9:00	" "				
					<i>May 10</i>				
8:00	96.4	68	28	8:00	Buchm + Pot.				
4:00	97	64	30	12:00	" "				
				3:00	" "				
					<i>May 11</i>				
				8:00	Buchm + Pot act				

Patient Barney Carpenter Carlisle, Pa., May 3rd 1912 Physician _____
 Address _____ Nurse _____

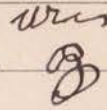
H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8:00	98	68	28	8 W	Buehm + Pot acet				
4:00	98	70	82	12:00	" "				
				8:00	" "				
May 4									
8:00	97.2	62	28	8 W	Buehm + Pot acet				
4:00	97.2	56	28	4 W	" "				
May 5 th									
8:00	96.4	68	24	8:00	Buehm + Pot acet				
4:00	97	68	22	12:00	Buehm + Pot acet				
				4:00	Buehm + Pot acet				
May 6 th									
8:00	96.4	62	24	8:00	Buehm + Pot acet				
4:00	97	64	28	12:00	" "				
May 7									
				8:00	Buehm + Pot acet				
May 7									
10:00	97.1	58	22	12:00	Buehm + Pot.				
4:00	97	60	20	4:00	" "				

Patient Carlisle, Pa., *April 25* 191 Physician
 Address Nurse

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
8.30	98	74	32			6.30	Food		
						12.00	"		
						5.30	"		
					<i>April 26</i>				
7.30	98	70	30	8.00	<i>Phen</i>	6.30	Food		
				12.00	<i>Bicarb + Pot</i>	12.00	"		
				2.00	"	5.30	"		
4.00	98	70	30	6.00	"	9.00	"		
					<i>Apr. 27</i>				
				8.00	"	6.30	Milk		
				12.00	<i>Bicarb & Pot</i>	12.00	"		
4.00	98	70	32	8.00	"	5.30	"		
				6.00	"	9.00	"		
					<i>Apr 28</i>				
				8.00	<i>Bicarb + Pot.</i>	6.30	Milk		
4.00	98	72	32	12.00	"	12.00	"		
				3.00	"	5.30	"		
				6.00	"	9.00	"		

Patient Carlisle, Pa., 191 Physician

Address Nurse

H.	T.	P.	R.	H.	Medicine	H.	Nourishment	H.	Remarks
400	98 ⁴	80	34						april 31 - XIX ^{wine} 
					april 21				
400	98	80	18	200		630	Nothing		
						1200	"		
						530	"		
					April 22				
730	98.4	80	34	8 in	Buchner + Pot. cont.	630	Nothing		
						1200	"		
						300	"		
						530	milk		
420	98 ⁴	80	30	600	" " "				
					April 23				
760	98	88	32	1000	Buchner + Pot.	630	milk		
						200	"		
						1200	"		
400	98 ⁴	70	30	600	" " "	530	"		
					April 24				
730	98	74	28	8 in	B. v. Buchner + Pot.	630	Full		
						1200	"		
						300	"		
400	99	74	30	600 800	" " "				