

983

APPLICATION FOR ENROLLMENT IN A NONRESERVATION SCHOOL.

Full name of child Abraham Mina Still Indian name is
 Name of father None
 Name of mother Sarah Le Skenandore Tribe
 Reservation, Oneida, Kis Degree of Indian blood of child, Full
 Is either parent white, if so, which? neither Are either or both allotted? no
 On what reservation? Age of child, 19 What
 reservation school attended? How long?
 If ever enrolled in a nonreservation school, name of school,
 When? How long? If ever
 dismissed from a school, where; when,
 and for what reason?

(Signed.) Abraham Mina Still

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, _____, parent, guardian or next of kin of the
 above-named child, _____, do hereby consent to
 transfer or enrollment for a period of ~~five (5)~~ ^{three (3)} years in the Indian school at Carlisle, Pa.
 Dated at _____ on the _____
 day of _____, 190...

(Signed.) _____
[Parent, Guardian or next of kin.]

PHYSICIAN'S CERTIFICATE.

I hereby certify that I have personally examined the above-named _____
 _____, and have found _____ physically sound, and recommend
 the transfer so far as _____ health conditions are concerned. Dated at _____
 on the _____ day of _____, 190...

(Signed) _____

AGENT'S OR SUPERINTENDENT'S INDORSEMENT.

_____, 190...
 The statements concerning the above-named _____ are be-
 lieved by me to be correct, and I hereby recommend the transfer.

(Signed.) _____
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.

Graduated '06 class - discharged

Card made

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_____

Chapman M. Hill

PHYSICIAN & GENEALOGIST

U.S. Indian Service

2018-2019 Yearbook

Readmitted 44

CARLISLE INDIAN INDUSTRIAL SCHOOL
DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

Dead

NUMBER 3548	ENGLISH NAME <i>Abraham M Hill</i>	AGENCY	NATION <i>Oneida</i>					
BAND	INDIAN NAME	HOME ADDRESS <i>(Mother) Sarah C. Sherandore, Oneida Wis</i>						
PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.
FATHER <i>Dead</i>	MOTHER <i>Living</i>	<i>Full</i>	<i>19</i>					
ARRIVED AT SCHOOL <i>Sept 13 1905</i>		FOR WHAT PERIOD <i>3 years</i>		DATE DISCHARGED <i>Mar. 30, 1906</i>		CAUSE OF DISCHARGE <i>Graduated</i>		
TO COUNTRY		PATRONS NAME AND ADDRESS					FROM COUNTRY	

THE SHAW-WALKER CO., MUSKOGON-CHICAGO 33877

Grade e

Months

Readmitted

ths in school before Carlisle,.....

e entered at Carlisle,..... *5th*

Grade at date of Discharge, *Graduate*

Trade or Industry, *Gen. Work*

Church, *Episcopal*

Conduct - *Good*

35488
 NUMBER
 ENGLISH

CARLISLE INDIAN INDUSTRIAL SCHOOL.
 DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT.

Dead

NAME <i>William Hill</i>		AGENCY <i>Oneida</i>			NATION <i>Oneida</i>			
INDIAN NAME <i>William Hill</i>		HOME ADDRESS <i>Sarah Skenandore Oneida, Wis</i>						
PARENTS LIVING OR DEAD		BLOOD	AGE	HEIGHT	WEIGHT	FORCED INSP.	FORCED EXPR.	SEX.
FATHER, <i>Living</i>		<i>Full</i>	<i>14</i>	<i>5</i>	<i>82</i>	<i>29 1/4</i>	<i>26</i>	<i>m.</i>
MOTHER, <i>Living</i>		FOR WHAT PERIOD <i>5 years</i>		DATE DISCHARGED <i>July 1905</i>		CAUSE OF DISCHARGE <i>Time out</i>		
ARRIVED AT SCHOOL <i>Aug 26. 1899</i>		PATRONS NAME AND ADDRESS						FROM COUNTRY
TO COUNTRY <i>May 26, 00</i>		<i>W. Barndt Treose Pa.</i>						<i>Sep. 14, 00</i>
" <i>1, '01</i>		<i>C. S. Shiner, Ashbury, Warren Co., N. J.</i>						<i>Aug. 2 - 1901</i>

SHAW-WALKER MUSKEGON 5478

Months in school before Carlisle, *80*

Grade entered at Carlisle, *5th*

Grade at date of Discharge,

Trade or Industry,

Church, *Episcopalian*

Conduct _____

DEPARTMENT OF THE INTERIOR
UNITED STATES INDIAN SERVICE
INDIAN INDUSTRIAL SCHOOL
CARLISLE, PA.

Dear

January 21, 1907

*Abraham M. Hill
Haskell, Lawrence, Kans.*

Dear friend;-

Please oblige by answering the questions below accurately and promptly and return this paper to me in the enclosed envelope, which requires no postage.

Are you married and if so to whom? *No.*

What is your Post Office address? *Haskell Institute, Lawrence, Kans.*

What is your occupation? *I am taking a commercial course with the aim of working my way through a school of Telegraphy.*

Have you been in the Indian Service, in what positions and how long in each? *No.*

Have you lived in the East any part of the time since your graduation and if so, where, how long and what positions did you fill? *No.*

Your friend

W. A. Mercer

Major 11th Cavalry,
Superintendent.