

The members of the Carlisle Indian Press were shocked to learn of the death of Margaret Blackwood Burd this summer. She was a member of our office force all last term and was married to Sampson Burd, one of our students, in July. They were spending their honeymoon with Sampson's people in Montana when she was taken ill with spinal menin-

506

1910

gitis. She will be remembered by all of us for her pleasant, cheerful, accommodating disposition.

**THE WESTERN UNION TELEGRAPH COMPANY.**

INCORPORATED

**24,000 OFFICES IN AMERICA.****CABLE SERVICE TO ALL THE WORLD.**

This Company TRANSMITS and DELIVERS messages only on conditions limiting its liability, which have been assented to by the sender of the following message. Errors can be guarded against only by repeating a message back to the sending station for comparison, and the Company will not hold itself liable for errors or delays in transmission or delivery of Unrepeated Messages, beyond the amount of tolls paid thereon, nor in any case where the claim is not presented in writing within sixty days after the message is filed with the Company for transmission.

This is an UNREPEATED MESSAGE, and is delivered by request of the sender, under the conditions named above.

ROBERT C. CLOWRY, President and General Manager.

NUMBER	SENT BY	REC'D BY	CHECK

**RECEIVED** at \_\_\_\_\_ 19\_\_

Dated \_\_\_\_\_

To \_\_\_\_\_

*of respiration result of  
acute Meningitis writing  
you today  
Sampson Burd*

**MONEY TRANSFERRED BY TELEGRAPH.**

**CABLE OFFICE.**

SEE OTHER SIDE FOR TELEGRAM

## The Western Union Telegraph Company

THE LARGEST TELEGRAPHIC  
SYSTEM IN THE WORLD.

OVER ONE MILLION MILES  
OF WIRE IN THE UNITED STATES  
AND CANADA.

It has over 24,000 Telegraph  
Offices, including Branch Offices.

It has also Direct Connection  
by Telegraph or Telephone with as  
many more remote and smaller  
stations, making a total list of  
over 50,000 in the United States,  
Canada and Mexico, and this num-  
ber is rapidly increasing.

### Seven Atlantic Cables,

Connecting North America with all points  
in Europe and beyond, including Two  
Cables of the American Telegraph and  
Cable Company, Four Cables of the Anglo-  
American Telegraph Company, and One  
Cable of the Direct United States Cable Co.

Direct Wires to Galveston, Texas, con-  
necting at that place with the Cables of the  
Mexican, the Central and South American  
Telegraph Companies for all points in  
Mexico and Central and South America.

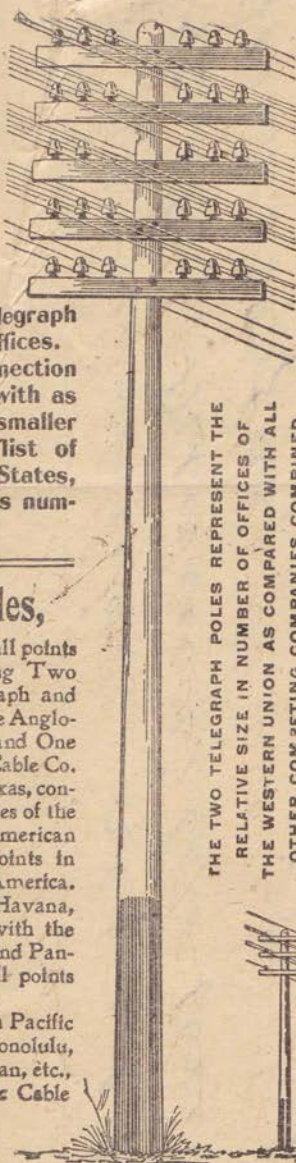
Direct Wires and Cables to Havana,  
Cuba, connecting at that place with the  
Cuba Submarine and West India and Pan-  
ama Telegraph Companies for all points  
in the West Indies.

Connects at San Francisco with Pacific  
Cables to the Sandwich Islands, Honolulu,  
Guam, the Philippines, China, Japan, etc.,  
and at Victoria, B. C., with Pacific Cable  
to Australia and New Zealand.

Connects at Seattle, Wash.,  
with U. S. Government Lines  
and Cables to and in Alaska.

Exclusive connection with the Great  
North-Western Telegraph Co. of Canada.

Domestic and Foreign Money Orders by Telegraph and Cable



THE TWO TELEGRAPH POLES REPRESENT THE  
RELATIVE SIZE IN NUMBER OF OFFICES OF  
THE WESTERN UNION AS COMPARED WITH ALL  
OTHER COMPETING COMPANIES COMBINED

W. U. T. CO.  
24,634  
OFFICES

OTHER COS.  
4,868  
OFFICES.

SEE OTHER SIDE FOR TELEGRAM



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ROBERT C. CLOWRY, President and General Manager.

NUMBER	SENT BY	REC'D BY	CHECK
10 P	Qm	Q	37 Collect Govt rate

RECEIVED at 8:52 Pm Aug 16 1910

Dated Antona you Mich 16

To Friedmaner Supt

Callisee Pa

Margaret died in Columbus Hospital Great Falls Mont everything was done for her but of no avail. Cause of death was paralysis

MONEY TRANSFERRED BY TELEGRAPH.

CABLE OFFICE.

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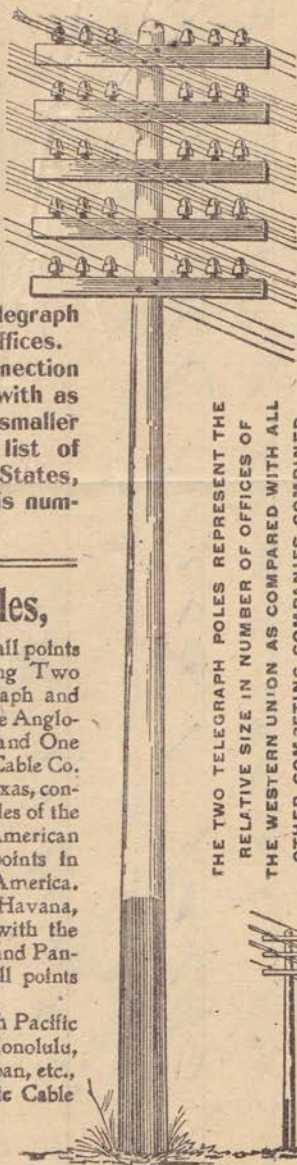
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# TRADE RECORD, CARLISLE.

Jan. 1, 1910 to June 30, 1910.

PUPIL *Margaret Blackwood -*

TRADE *Office work -*

ABILITY *Good at Penmanship & Typewriting -*

CONDUCT *Excellent -*

REMARKS *A steady, industrious worker -*

INSTRUCTOR *E. H. Miller -*

6103

## CARLISLE INDIAN INDUSTRIAL SCHOOL

DESCRIPTIVE AND HISTORICAL RECORD OF STUDENT

Dead

NUMBER <b>2274</b>	ENGLISH NAME <b>Margt. Blackwood</b>	AGENCY	NATION <b>Chippewa</b>		
BAND	INDIAN NAME	HOME ADDRESS <b>John Blackwood, Ontonagon, Mich.</b>			
PARENTS LIVING OR DEAD		BLOOD <b>1/2</b>	AGE <b>17</b>	HEIGHT	WEIGHT
FATHER:		MOTHER:		FORCED INSP.	FORCED EXPR.
ARRIVED AT SCHOOL <b>Nov. 6, 1907</b>		FOR WHAT PERIOD <b>Five years</b>		DATE DISCHARGED <b>Sept. 30, 1910</b>	CAUSE OF DISCHARGE <b>Dead</b>
TO COUNTRY	PATRONS NAME AND ADDRESS				FROM COUNTRY
<b>6-28-'08</b>	<b>Eliz. S. Taylor, W. Chester Pa.</b>				<b>8-29-'08</b>
<b>7-13-'09</b>	<b>Mrs. E. C. Shields, W. Chester, Pa.</b>				<b>8-27-'09</b>
<b>5-28-'10</b>	<b>Mrs. H. A. Wells, Sea Dale City, Box 2024.</b>				
THE SHAW-WALKER CO., MUSEUM-CHICAGO 33877					

Months in school before Carlisle,.....

Grade entered at Carlisle,.....**7th**.....Grade at date of Discharge,.....**Graduate**.....Trade or Industry,.....**Housework**.....Church,.....**Catholic**.....

miles to sch.

# PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL *Blackwood Margaret* DATE *May 23 1910*

AGE *19* YEARS NEW STUDENT. TRIBE *Chippewa* STATE *Mich.*

DEGREE OF INDIAN BLOOD *1/2*

INSPECTION *Good development*

PALPATION *normal*

PERCUSSION *Normal*

AUSCULTATION { RESONANCE *Normal*  
RESP. MURMUR *Normal*

HEART SOUNDS

MENSURATION { INSP. *32 1/2* RESPIRATION *24* PULSE *76*  
EXP. *29 1/2*

TEMPERATURE *98.4* degs. HEIGHT *5* FT *7 1/4* IN. WEIGHT *120* LBS.

VISION *10/10* VACCINATION *good*

MENSTRUATION

FAMILY HISTORY:

	Living.	Condition of Health.	Dead.	Cause of death.
FATHER	<i>yes</i>	<i>Good</i>		
MOTHER	<i>yes</i>	<i>Good</i>		
BROTHERS {	<i>3</i>	<i>Good</i>	<i>3</i>	<i>1 drowned</i> <i>2 ?</i>
SISTERS {	<i>2</i>	<i>Good</i>	<i>2</i>	<i>1 Hydrocephalous</i> <i>1 Sp. meningitis</i>
PERSONAL HISTORY:				

REMARKS:



HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITION:

May 23 - 1910

Good

# PHYSICAL RECORD,

CARLISLE INDIAN SCHOOL.

NAME OF PUPIL Blackwood Marg'r. DATE 19 ?

AGE 17 YEARS { NEW { STUDENT. TRIBE Chippewa STATE Mich.

DEGREE OF INDIAN BLOOD \_\_\_\_\_

INSPECTION Good development

PALPATION Normal

PERCUSSION Normal

AUSCULTATION { RESONANCE \_\_\_\_\_  
RESP. MURMUR Normal

HEART SOUNDS \_\_\_\_\_

MENSURATION { INSP. 32 3/4 RESPIRATION 18 PULSE 78  
EXP. 29

TEMPERATURE 98 degs. HEIGHT 5 FT. 6 IN. WEIGHT 122 1/2 LBS.

VISION 10/10 VACCINATION good 17/108

MENSTRUATION Normal

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>3</u>	<u>good</u>	<u>3</u>	<u>1 drowned</u> <u>2 ?</u>
SISTERS {	<u>2</u>	<u>good</u>	<u>2</u>	<u>1 Hydrocephalous</u> <u>1 Sp. Meningitis</u>

PERSONAL HISTORY:

Scarlet fever 1 year ago. Good  
health since.

REMARKS:

HOSPITAL RECORD.....

EXAMINATION FOR OUTING:

DATES:

CONDITIONS:

June 11-09

Good.





Margaret Blackwood

Margaret Blackwood Burd

# BRIEF

(For a child not enrolled at an Agency.)

## APPLICATION OF

*Josephine Blackwood*

FOR THE ENROLLEMENT OF

*Margaret Blackwood*

IN THE INDIAN SCHOOL AT

CARLISLE, PENNSYLVANIA

POST-OFFICE ADDRESS OF APPLICANT

*Ontonagon Mich*

Date of enrollment, \_\_\_\_\_, 190

Term of enrollment, *Five* ( *5* ) years.

NAME OF COLLECTING AGENT:

Position, \_\_\_\_\_





## 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 Pennsylvania, of Margaret Blackwood female, I, Mrs Josephine Blackwood (Name of child) (Sex) (Parent, guardian, or next of kin) of Ontonagon P. O., State of Michigan do hereby voluntarily consent and agree to her 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.   
 Not less than 3

I further say that the said child was born at Ontonagon Michigan on Dec 28<sup>th</sup> 1890 that the father, John Blackwood a 1/2 Indian of the Chippewa Tribe located at Ashland Wis. Agency; that he left the tribe about 1878; that the mother, Josephine Blackwood a 1/2 Indian of the Chippewa Tribe located at Ashland Wis. Agency, and left the tribe about 1878; 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	DATE OF ENROLLMENT	DATE OF DISCHARGE	CAUSE	GRADE
1. <u>St. Pleasant</u>	<u>Apr. 3<sup>rd</sup> 1906</u>	<u>Jun 24<sup>th</sup> 1907</u>	<u>Graduated</u>	<u>Eighth</u>
2.				

This 7<sup>th</sup> day of October, 1907

Two witnesses:

X Mrs Chas FrenetteX Mrs. Agnes LeclairJosephine Blackwood  
Parent, guardian, or next of kinP. O., Ontonagon Michigan

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

Sworn to and subscribed before me this 7<sup>th</sup> day of October, 1907

Signature of applicant

Parent, guardian, or next of kin

My Commission Expires Feby. 4th. 1909

(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.)

## 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.



# CERTIFICATE OF PHYSICIAN

I, Andrew L. Swinick, a practicing physician of Ontonagon County Michigan, do hereby certify that I have carefully examined Margaret Blackwood 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 7<sup>th</sup> day of October, 1907 Andrew L. Swinick M. D.

## VOUCHER OF SOLICITOR FOR SCHOOL

I hereby certify that I was present and witnessed the execution of the foregoing application made by \_\_\_\_\_; that its contents were explained or interpreted to \_\_\_\_\_ by \_\_\_\_\_; that I believe \_\_\_\_\_ understood the purport thereof; that I was present at the medical examination of the child named herein; that \_\_\_\_\_ resides with \_\_\_\_\_, in or near the town of \_\_\_\_\_; that the child can not have adequate and proper educational facilities at home for the reason that \_\_\_\_\_

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, 190\_\_\_\_\_

Official title

(NOTE—This voucher must be executed by the official representative of the nonreservation school to which application is made. Pupils and Indian solicitors will not be accepted.)

## VOUCHERS OF DISINTERESTED PERSONS

### VOUCHER No. 1.

I, Casper Room, a Merchant, of Ontonagon Michigan, do hereby certify that I am personally acquainted with Josephine Blackwood who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Margaret Blackwood; that he 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 her parents cannot afford it

This 7<sup>th</sup> day of October, 1907

Casper Room



## VOUCHER No. 2.

I, John F. Weiss, a Merchant of

(Business, calling, or profession.)

Detroit Michigan, do hereby certify that I am personally acquainted with Josephine Slackwood, who makes the foregoing application; that I believe his statements therein are true; that I am acquainted with Margaret Slackwood; 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 can not receive proper and adequate schooling at home for the reason that her parents cannot afford it

This 7th day of October, 1907

John F. Weiss

## CERTIFICATE OF SCHOOL PHYSICIAN

I hereby certify that on \_\_\_\_\_, I made a careful examination of the physical condition of \_\_\_\_\_, the child named in

(As soon after arrival as possible.)

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 special 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.



# OUTING RECORD — CARLISLE INDUSTRIAL SCHOOL

Name of Student

Marg. Blackwood

Home Address

Mrs. Mrs. Blackwood. Ontonagon Mich. Tribe Chippewa

Age at Entrance

17

Date of Entrance

11-6-07

Shop

JAN.

FEB.

MAR.

APR.

MAY

JUNE

JULY

AUG.

SEPT.

OCT.

NOV.

DEC.

TOTAL OR AVERAGE

Patron

Mrs. Ed. Shields

Locality

Town

Days in School

Address

West Chester. Pa.

R. R. Station

Conduct

Recommended by

Grade in School

Ability

Grade of Home

Church

Catholic

Health

Date of Outing

7-13-09

Date Returned

8-27-09

Wages

Earnings

\$4

g. g.

Ex. Ex

g. g.

### OUTING RECORD - CARLISLE INDUSTRIAL SCHOOL