CARLISLE INDIAN SCHOOL

No.	Name.	Age.	Tribe.	Degree of Indian Blood.	Name of Agency and Reservation, if Enrolled; if not, Post Office or Family.
5701	Simpkins Virgil	12	Osage	1/8	Pawhuska, Okla.

Date Entered.	Months in school before enrollment here.	In what Grade or Room.		Distance to nearest public school from pupil's home.	Remarks. (Temporarily absent, outing, deserters, on sick leave, special authorities for enrollment, etc.)		
		On entering here.	At date of this report.		To Country	From Country	Date Discharged
SEP - 4 1917	36	V	IV		JUN - 8 1918		
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