

**University of Illinois at Urbana-Champaign
Anthropology 454/455 (6 credits)
Field School in Archaeology
Summer 2025 (June 18 - July 28)**

Project Director: Dr. Brandon T. Ritchison
Georgia's Coastal Communities Archaeology Project

Application for participation.

Any questions can be answered via email by Dr. Ritchison: britch@illinois.edu

GCCAP Project Application Date:

You are applying to join a research project operating on a remote coastal island and under conditions which are quite challenging (heat and humidity, etc.) The project involves physical labor and the ability to live and cooperate in close quarters with others. This questionnaire helps to ensure that the project operates smoothly and that we have some ideas as to your skill, interests, strengths, and weaknesses prior to the beginning of the field season. Please try to answer as accurately and completely as possible. Thank you.

Name:

Date of Birth:

Address:

Phone #:

Email:

Major/Year (students): GPA:

If on academic probation, explain why and if it will interfere with financial aid.

Name of Emergency contact:

Phone:

Relevant course work and/or experience:

Career goals and relationship to participation:

What do you expect from this experience?

What do you think your greatest contribution to the project can be?

We all have weaknesses, what do you consider yours to be?

What do you consider your strongest points?

Are you allergic to any insects, plants, food, etc.? If so, you will need to bring epinephrine pens if potentially needed. If you have other non-seasonal allergies, please be sure to bring the necessary medication and inform Dr. Ritchison.

Please consider the following conditions carefully and rate how you feel you would fare in the following conditions. You may augment answers with an explanation.

<i>Indicate with a ✓ or X</i>	Excellent	Good	Fair	Poor
Living Space				
• Shared room				
• Dormitory living				
• Rustic facilities				
• Unusual food, limited diversity				
• Limited water availability				
• Wilderness experience				
• Work/camp in remote areas				
Climatic Conditions				
• Heat				
• Humidity				
• Tropical weather				
Personal Characteristics				
• Flexibility				
• Observation skills				
• Patience				
• Curiosity				
• Ability to work as/in a team				
• Ability to follow directions				
• Initiative				
• Physical stamina				

Do you smoke? Yes _____ No _____

Skills (please indicate knowledge in any of these areas and extent of knowledge/ability)

Knowledge of foreign language (which ones):

Camping experience:

Backpacking/Hiking experience:

First aid experience:

Vehicle maintenance/repair:

Truck/4-wheel drive vehicle experience:

Experience with standard transmission:

Electronics/mechanic abilities:

Mapping/survey experience:

Computer skills:

Sketching/illustration ability:

Technical drawing/drafting abilities:

Professional writing:

Photography:

Please include any additional information about yourself in the space below or on the back of this page. Your answers will be carefully considered in the selection process and you will be notified when decisions have been reached for the next field season.

CHECK LIST

If you are interested in joining the project you need to begin preparations for your trip. If accepted to field school, I will email out an equipment list.

Print **hard copy** of the **disclaimer** on next page, sign and turn into Dr. Ritchison in his mailbox (109A Davenport). Applications will not be assessed until signed form received by Dr. Ritchison

DISCLAIMER/RELEASE

**Acknowledgement of Risks and Release of Responsibility
Department of Anthropology, University of Illinois**

Dr. Brandon T. Ritchison, Department of Anthropology, University of Illinois Urbana-Champaign as PI for the Georgia Coastal Communities Archaeological Project (GCCAP) project is organizing a field program in the summer of 2025, under the auspices of the University of Illinois.

I acknowledge that there are certain risks, hazards and dangers, including risks of physical injury, disability, or death and risk of loss of use or damage to my personal property. Risks include but are not limited to transportation accidents, weather related hazards and natural disasters, infectious diseases, the possibility of slips and falls, pinches, scrapes, twists and jolts that could result in scratches, bruises, sprains, lacerations, fractures, concussions, or even more severe life-threatening hazards. I understand that injury or loss may result from unknown or unexpected risks, but may also result from the use of equipment, materials, or facilities recommended by the University, environmental conditions, from the acts or omissions of others, or from the unavailability of immediate emergency medical care.

I understand that the University of Illinois does not guarantee my personal health or safety at any point during this Program, nor does it protect me against risk of loss of my personal property. I understand that it is the policy of the University of Illinois that participants be covered by health insurance, and it is my responsibility to make sure I am covered for the duration of the Program. If I have a physical, mental or other condition that may in any way impact my ability to participate in the Program, I will disclose that to the Faculty member in charge of the Program. Even if I disclose these conditions, however, the University is not responsible for things that may happen to me because of my condition.

I understand the University of Illinois does not assume responsibility for the actions of persons not employed by the University, for events that are not part of the Program, or that are beyond the control of the University or their contractors, or for situations that may arise due to the failure of the participant to disclose pertinent information. I understand and hereby acknowledge that I assume all risks incurred by my participation in the Program. In consideration of being allowed to participate in the Program, I hereby release the University of Illinois, its Board of Trustees, the Georgia Department of Natural Resources, or other landowners and either institutes' officers, agents and employees from any and all claims arising out of or in any way connected with the Program and my participation in the Program, including but not limited to the risks as outlined above.

I am competent to sign this consent release and waiver and have read and understood all the provisions contained in it and intend it to be binding on me and my heirs, successors, assigns and personal representatives.

PARTICIPANT:

Name (printed)

Signature

(Date)