

Emory University
Department of Anthropology
Graduate Fieldwork Information

Name: _____

ID# _____

Cohort: _____

Field Location: _____

Field address: _____

Field phone: _____

Best email: _____

Emergency Contact: _____

Email: _____

Phone: _____

Anticipated Dates of Fieldwork: _____

Anticipated Return Date: _____

Funding Source: _____

Amount: _____

Dates: _____

Funding Source: _____

Amount: _____

Dates: _____

Pending Funding: _____

Notification Date: _____

Please attach: copies of grant proposals, IRB Approval form, Compass Access form, copy of passport