



# *THE BELIZE VALLEY ARCHAEOLOGICAL RECONNAISSANCE PROJECT*

---

## **Application Form**

You are applying to join a research project which is operating in a culturally diverse country under conditions which will likely be quite different from those to which you are accustomed to in your home country. The project involves hard physical labor and the ability to live and cooperate in close quarters with others in a tropical environment. This questionnaire helps to ensure that the project operates smoothly and that we have some idea of your skills, interests, strengths, and weaknesses prior to the beginning of the field season. Please try to answer as accurately and completely as possible.

If this webpage does not automatically send when you click the "Submit Request" button, please fill in the PDF version of the application using Adobe Acrobat Professional. To fill in this form use the "TouchUp Text Tool" (i.e. Tools/Advanced Editing/TouchUp Text Tool). Instead of checking items off as in the online application form, just mark selections off with an "X." Having completed the form, rename the file as your full name using the "Save As" function and send it as an email attachment to Myka Schwanke ([archaeology@bvar.org](mailto:archaeology@bvar.org)).

If you are experiencing difficulties using the text features of Adobe Acrobat Professional or if you simply do not have this software, you can copy and paste this application into your word processor or email and send the completed form via email to Myka Schwanke ([archaeology@bvar.org](mailto:archaeology@bvar.org)). Note that in Adobe Acrobat Reader you can copy the content of PDF files to the clipboard by using the corresponding function under the "Edit" menu. Having done this you can paste (Ctrl+V) the form into a word processor or an email. Then fill in the form accordingly, but instead of checking items off as in the online application form, just mark selections off with an "X."

Thank you.

**Contact Information:**

Name	<hr/>		
Date of Birth	Day	Month	Year
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender	Female	Male	
	<input type="text"/>	<input type="text"/>	

**Please provide the following contact information:**

Street Address	<hr/>
	<hr/>
City	<hr/>
State/Province	<hr/>
Zip/Postal Code	<hr/>
Country	<hr/>
Work Phone	<hr/>
Home Phone	<hr/>
Fax	<hr/>
E-mail	<hr/>

**Permanent home address information:**

Street Address	<hr/>
	<hr/>
City	<hr/>
State/Province	<hr/>
Zip/Postal Code	<hr/>
Country	<hr/>

**Belize Valley Archaeological Reconnaissance Application:**

You are applying to join a research project which is operating in a culturally diverse country under conditions which will likely be quite different from those to which you are accustomed. The project involves hard physical labor and the ability to live and cooperate in close quarters with others in a tropical environment often in the middle of the jungle. This questionnaire helps to ensure that the project operates smoothly and that we have some idea of your skills, interests, strengths, and weaknesses prior to the beginning of the field season. Please try to answer as accurately and completely as possible.

**Program (Choose One):**

Space in the project is limited but we will try to place you in the session of your preference. Choose an alternate choice only if you are interested and are able to attend the session. If you select alternative choices please ensure that you indicate which your preferred (primary) and alternate (secondary) choice is.

**CHOOSE PREFERRED PROGRAM**

Surface Site Operations                       Cave Site Operations

Each group has limited space. If the group you have applied for is full, would you still like to participate on the project at the other site?

- If Surface Site is your preferred choice, check here
- If Cave Site is your preferred choice, check here
- If Surface Site is your alternate choice, check here
- If Cave site is your alternate choice, check here

**OPTION ONE (4 – weeks)**

Session preference (one/two/both):

One                       Two                       Both

If the above selection is your preferred choice check here:                        
If the above selection is your alternate choice check here:                     

**OPTION TWO (2 – weeks)**

Session preference (one/two/both):

One                       Two                       Both

If the above selection is your preferred choice check here:                        
If the above selection is your alternate choice check here:                     

**OPTION THREE (customized)**

Session(s): a variety of dates between 6 June and 5 August. If you are interested in a customized stay with the project, submit proposed dates of stay below:

From: \_\_\_\_\_ To: \_\_\_\_\_

**University Credit**

Seeking University of Mississippi credit for this field course (yes/no):

Yes [ ]                      No [ ]

**Citizenship**

Country of Citizenship: \_\_\_\_\_  
Passport number: \_\_\_\_\_

(If you do not yet have a passport, please write 'pending'. You should apply for your passport right away as processing can take up to 4 weeks).

**Please provide physician information:**

Name \_\_\_\_\_  
Work Phone \_\_\_\_\_

**Please provide Employer/School information:**

Name \_\_\_\_\_  
Work Phone \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_  
State/Province \_\_\_\_\_  
Zip/Postal Code \_\_\_\_\_  
Country \_\_\_\_\_  
Major/Year (students): \_\_\_\_\_

**Relevant course work and/or previous archaeological experience:**

**What do you expect from this experience?**

**We all have weaknesses. What do you consider yours to be?**

**What do you consider to be your strengths?**

**Special archaeological interests?**

**Current sports or other recreational activities:**

**Additional comments/information about yourself:**

**Foreign travel experience. Please list which countries you have visited and when.**

**Camping/Backcountry experience:**

**Medical and dietary concerns:** It is imperative that we are aware of any special medical and dietary concerns which you may have. We will not be able to accommodate vegetarian or special diets and no facilities exist to deal with severe handicaps or medical conditions.

**Special medications:**

**Special Diet:**

**Allergies:**

**Previous respiratory ailments:**

**Do you have any physical/medical conditions of which we should be aware? (e.g. bad back, trick knee, etc.)**

**How did you find out about the project?**

Last updated: 23 October 2006.