

# SIUE Archaeology Field School

The Department of Anthropology at **Southern Illinois University Edwardsville (SIUE)** will conduct a six-week archaeological field school from **May 18 – June 26** under the direction of **Dr. Susan Kooiman**. Depending on the weather, the field school typically consists of approximately five weeks in the field at or near SIUE and approximately one week in the Anthropology Lab at SIUE. This year we are planning to continue our investigation of the Middle Woodland, Mississippian, and possible Late Woodland occupations at the Gehring site (11MS99) on the SIUE campus. We will be investigating changing foodways, material culture, and social relationships through time at the site and the greater American Bottom region. Please check out the SIUE Anthropology Department website for more information on our prior discoveries at this site.

This course offers instruction in archaeological survey, excavation, mapping, sediment analysis, artifact identification, laboratory methods, and interpretive techniques. In addition, students will have the opportunity to attend lectures and discussions on prehistoric archaeology and material culture in the American Bottom. Field trips to archaeological sites in Illinois and possibly Missouri are also planned.

### *Program Registration:*

Participants for this field school will be selected after review of submitted applications. Enrollment is ordinarily limited to fifteen (15) students. Application forms are available on the SIUE Department of Anthropology website. Review of submitted applications will begin **March 1**.

### *SIUE Credit, Tuition, & Fees:*

Three (3) or six (6) credit hours of ANTH 475 will be offered. SIUE students seeking the BS in anthropology are required to take 6 credits of field school. If space permits, applications from students interested in taking just 3 credits of ANTH 475 will be considered, but the applicant should contact Prof. Kooiman if interested in this option. SIUE tuition & fees are posted at <http://www.siu.edu/payingforcollege/>. In addition, please note that field school students must also pay a \$150 course specific fee for ANTH 475.

Students are responsible for arranging their own housing, meals, and transportation.

### *For additional information contact:*

Dr. Susan Kooiman  
Department of Anthropology  
Southern Illinois University Edwardsville  
Edwardsville, IL 62026-1451  
(618) 650-2724  
skooima@siue.edu

## APPLICATION- SIUE ARCHAEOLOGY FIELD SCHOOL

Completed applications and liability waivers should be given to Dr. Susan Kooiman in Peck 0403A or mailed to Department of Anthropology, SIUE, Edwardsville, IL. 62026-1451. Deadline for priority registration is March 1.

Name: \_\_\_\_\_ date of birth \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_ Student ID 800 \_\_\_\_\_

Major(s)/program (e.g., Anthropology/BS) \_\_\_\_\_

Which of the following are you applying for?

ANTH 475 Archaeology Field School (3 credit hrs)

ANTH 475 Archaeology Field School (6 credit hrs)

Emergency Contact: (relationship to you)

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Reference: (List professor or one person for whom you have worked other than family members)

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ E-mail: \_\_\_\_\_

Please list previous course work or field experience in archaeology:

---

---

---

Please describe your reasons for participating in the SIUE field school:

---

---

---

---

What do you know about the Gehring site?

---

---

---

Have you completed your senior project? If so, what was the topic? If not, what topic(s) are you interested in?

---

How many total credits have you completed towards your degree?

---

Do you have any medical conditions or special needs that I should know about? (check any)

respiratory problems  asthma  heart condition  high blood pressure  diabetes  allergies  IBS/IBD  
 eyesight problems  heat/humidity susceptibility  depression/anxiety  daily medications  other

Please explain any conditions I should know about:

---

Anything else you want me to know?

**RELEASE, WAIVER OF LIABILITY, ASSUMPTION OF RISK, & COVENANT NOT TO SUE  
AGREEMENT  
(BINDING LEGAL DOCUMENT -- READ CAREFULLY BEFORE SIGNING)**

I hereby acknowledge that my participation in ANTH 475: Archaeological Field School, hereinafter "Activity", sponsored and administered by Southern Illinois University Edwardsville's Department of Anthropology, hereinafter Anthropology, involves an inherent risk of and exposure to property damage and bodily or personal injury to me as a participant and to others as participants. Dangers related to such activities may include but are not limited to: hypothermia, broken bones, strains, sprains, bruises, drowning, concussion, heart attack, heat exhaustion, injuries associated with travel, and death. I acknowledge that I am aware that there are risks, hazards, and dangers inherent in the Activity and in the training, preparation for, and travel to and from the Activity. I further acknowledge that it is my sole responsibility to participate only in those activities for which I have the prerequisite skills, qualifications, preparations, and training for the Activity. I acknowledge that the Board of Trustees of Southern Illinois University governing Southern Illinois University Edwardsville and its members individually, and its officers, agents, and employees (hereinafter SIUE) do not warrant or guarantee in any respect the competency or mental or physical condition of any third party affiliated with the Activity, including third party leaders, instructors, vehicle drivers, or individual participants in the Activity. I further acknowledge that SIUE makes no warranty as to the condition, safety, or suitability of any equipment, vehicle, property, or premises for any purpose. I acknowledge that I am solely responsible, through insurance or otherwise, for any hospital or other costs arising out of any bodily injury or property damage sustained through my participation in the Activity. I hereby assume any and all such risk. I acknowledge that SIUE does not provide insurance coverage for me. For the sole consideration of SIUE arranging for and allowing my participation in the Activity, and in connection therewith, making available for my use while participating in the Activity, certain equipment, facilities, grounds, or personnel of SIUE, I hereby do for myself, my spouse, if applicable, my heirs, executors, administrators and assigns, agrees to waive liability, release, hold harmless, covenant not to sue, and forever discharge SIUE from any and all liability, claims, demands, rights, and causes of action of whatever kind, arising from or by reason of any personal injury, property damage, or the consequences thereof, resulting from or in any way connected with my participation in the Activity whether caused by the ordinary, active or passive negligence of SIUE or otherwise, to the fullest extent provided by law. I understand and agree that SIUE does not have medical personnel available at the locations of the Activity; that SIUE is granted permission to authorize emergency medical treatment for me; that such action by SIUE shall be subject to the terms of this Agreement; and that SIUE assumes no responsibility for any injury or damage which might arise out of or in connection with such authorized emergency medical treatment. I understand that acceptance of this signed *Release, Waiver of Liability, Assumption of Risk, & Covenant Not To Sue Agreement* by SIUE shall not constitute a waiver, in whole or in part, of sovereign immunity by SIUE; that it shall be effective during the entire period of my participation in the Activity; that it binds me and my heirs, executors, administrators, and assigns; that it shall be construed in accordance with the laws of Illinois; and that if any of its terms or provisions are held illegal, unenforceable, or in conflict with any law, the validity of the remaining portions shall not be affected thereby.

**I have read and understand this entire statement and have freely and voluntarily signed this Waiver & Release of Liability & Covenant Not To Sue Agreement. I warrant that I am over the age of 18 years.**

This \_\_\_\_\_ day of \_\_\_\_\_, 2020.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Signature of Witness  
(Must be 18 years or older)