Khirbat Iskandar Archaeological Project 2019: Application*

To be completed by the applicant					
Applicant's Name	e:			·	
Home phone # _	ome phone # Additional phone #(s)				
Local Address: _	ress: Street or Box #				
	City	State	Zip		
	E-mail Address and Fax Number				
Status during 18/19 academic year: UNDERGRAD FR SOPH JR SR GRAD 1YR 2YR 3YR+					
College Degree(s) received (if any):					
Personal Background: (Please elaborate on a separate sheet of paper)					
1. What archaeology, anthropology, or geography classroom or field experience have you had (if any)?					
2. What other relevant skills do you have?					
3. What is your interest in archaeology, and why do you want to participate in the Khirbet Iskander Project?					
4. What is the general condition of your health? EXCELLENT GOOD AVERAGE FAIR?					
5. Do you have any physical or chronic conditions that limit or impact your activities (e.g., respiratory problems, diabetes, etc.)?					
6. Do you have any medical, religious, or personal restrictions on your diet?					
Applicant's Signa	ature:		Date:		
Forms to be completed by applicant:					
 Application Faculty Recommendation (unless a previous participant on the Iskandar Expedition) Advisor Recommendation (LCU students) Medical Release (LCU students) Medical Form Travel Participation Agreement (LCU students) Security Form (for the Department of Antiquities of Jordan) Release and Waiver Form 					

^{*} All new applicants for this project must submit one recommendation from a member of their University faculty, not involved in the trip. If not associated with a university, a "professional recommendation" will be accepted. See "Forms to be completed by applicant."