FIELD CARD - FOR PARTICIPANTS

Name:	Tel
Home addr	ess in Norway:
Name of ins	surance company:
Next of kin	(name, residence and tel.):
FIELDWORI	(DETAILS
Fieldwork n	ame/type:
Fieldwork le	eader, name:
Fieldwork a	rea/workplace:
Duration	From: To:
Private itine	erary: here if you are planning a private trip in connection with your fieldwork.
Please describe	here if you are planning a private trip in connection with your fieldwork.
I confirm th	at I have read NTNU's guidelines on <u>Fieldwork – for participants</u> .
	at I will comply with the security procedures applicable to the fieldwork, and that a way to ensure the safety of myself and others.
Place/date:	Signature:
Send completed	I field card to the fieldwork leader. Field cards are stored at the faculty/department while the fieldwork is

being conducted.