

INFORMATION FORM TO BE SUBMITTED BY THE MA STUDENT

**PRIOR** TO LEAVING FOR FIELDWORK

Please complete & submit this form **digitally** at

[stucoanthropology@FSW.leidenuniv.nl](mailto:stucoanthropology@FSW.leidenuniv.nl)

|  |  |
| --- | --- |
| **Students details** | |
| Student’s name and UL student-nr: |  |
| Supervisor at CA-DS: |  |
| Fieldwork period | From   /  /20   until   /  /20 |

|  |  |
| --- | --- |
| **Please enter the following details:** | |
| Exact travel data and flight numbers (including local travel within the country of destination) – *If applicable* |  |
| Your contact details when abroad, including address, phone nr, e-mail \* |  |
| Contact details of the local contact-person (or organization) |  |
| Name of travel insurance company and the number  of your insurance (polisnummer”) |  |
| Contact in Case of Emergency: name, relationship, address, phone, e-mail |  |