

Agreement on Fieldwork

Graduate School, Faculty of Social Sciences

15 higher education credits

Student's Personal Data

Name:	
Personal ID number: <i>yymmdd-xxxx</i>	
Programme and major (if applicable):	
Personal email:	
Mobile phone number:	
Contact in case of emergency:	

Fieldwork Information

Fieldwork organisation /location: <i>No abbreviations</i>	
Full address:	
Country:	
Fieldwork duration: <i>Specify dates. Must be between 8 and 10 weeks.</i>	
Fieldwork contact: <i>Name and contact details</i>	
Description of fieldwork: The student is to complete 320 hours/8 weeks of work duties in the field. The remaining 80 hours/2 weeks are to be used to complete the course assignments and examinations.	

As the contact person in the field, I hereby certify that the conducted fieldwork will follow the intentions of the fieldwork course syllabus.

City, Date and Signature, Fieldwork contact

As a student I am fully aware of the fact that nobody but I am responsible for all financial matters related to the fieldwork such as costs for extra accommodation and travel costs connected with the fieldwork.

City, Date and Signature, Student

As Director of Studies at the Graduate School at the Faculty of Social Science, Lund University, I hereby approve of the above-mentioned fieldwork.

City, Date and Signature, Lena Karlsson, Director of Studies