



DEPARTMENT OF ANTHROPOLOGY

9500 GILMAN DRIVE DEPT 0532
LA JOLLA CALIFORNIA 92093-0532

29 January 2018

Dear Study Abroad Student of the Ancient Mediterranean World

Welcome! On behalf of the Department of Anthropology and UCSD Summer Session, I would like to thank you for your interest in the eight (or 12) unit study abroad course to be held in Sicily, Sardinia, and Rome, 2 -18 September 2018. During this year's course, we will visit 37 ancient sites, 8 museums, and numerous Medieval churches and castles on the seacoast and in the mountains of Mediterranean Italy. This is the second time this program has been offered at UCSD, and it promises to be very exciting.

The earliest sites we visit date to the Paleolithic period, but the focus is on Neolithic, Bronze Age (Nuraghic), Phoenician/Punic/Carthaginian, Classic Greek, Roman, and Medieval civilizations. Our days will be spent touring these ancient sites as well as visiting famous museums. We also will take time to visit the fabulous beaches of Sicily and Sardinia, climb the active volcano Mt. Etna, and tour caves and sea grottos. We end our two weeks of intensive study in Rome. If you are interested in seeing more of the Eternal City or visit elsewhere in Italy, you may stay longer when the program is finished!

The following pages and a separate attachment contain information that should answer most of the questions you may have about the program. Please remember that it is open to qualified UCSD students, students from other colleges or universities, family members, and friends. This may be the only course you take with your parent!

If you have any questions that are not answered here, please feel free to contact me by e-mail at: gbraswell@ucsd.edu. I also would be happy to meet with you at UCSD if you have any particular concerns.

The rest of this attachment contains a program itinerary and a complete application package. The application, which should be completed and either brought or mailed to me at the Department of Anthropology, consists of:

- (1) An enrollment form (1 page);
- (2) An application essay (1 page) explaining why you want to come on the course;
- (3) Two liability forms (3 pages total);
- (4) A medical form (1 page) to be filled out by your physician; and
- (5) A Program Fee agreement form (1 page).

The separate attachment contains a course handbook, which explains a lot about what we will do everyday, what to expect, and what to bring to Italy.

I look forward to seeing you in the Mediterranean!

Sincerely,

A handwritten signature in black ink, appearing to read "Geoffrey E. Braswell", with a stylized flourish at the end.

Prof. Geoffrey E. Braswell
Department of Anthropology, UCSD
9500 Gilman Drive, MC 0532
La Jolla, CA 92093-0532



The Ancient Mediterranean World

Earn 8 to 12 University of California academic units in Anthropology 135S: Ancient Mediterranean World, September 2 - 18. Visit 37 ancient sites, 8 museums, and climb an active volcano. Program led by Professor Geoffrey E. Braswell, UCSD.

Geoffrey E. Braswell
Dept. Anthropology, UCSD
9500 Gilman Drive, MC 0532
La Jolla, CA 92093-0532
(858) 822-0726
gbraswell@ucsd.edu

ITINERARY: Ancient Mediterranean World Sicily, Sardinia, & Rome*

- Day 1: Fly to Sicily. **Roman Amphitheater, Diocesan Museum/Achilles Bath, Welcome Banquet** (Night: Catania)
- Day 2: **Necropolis Pantalica, Ancient Ortigia, Parco Archeologico Neapolis, Syracuse Regional Museum** (Night: Catania)
- Day 3: **Naxos, Taormina, climb Mount Etna** (Night: Catania)
- Day 4: **Villa Imperiale de Casale, Heraclea Minoa, afternoon at the beach** (Night: Agrigento)
- Day 5: **Valley of the Temples, Museum, night re-entry to site** (Night: Agrigento)
- Day 6: **Selinunte, Cava di Cusa, Cathedral & Cloister Monreale** (Night: Palermo)
- Day 7: **Moza, Segesta, overnight boat to Sardinia** (Night: ferry cabin)
- Day 8: **Nora, Cagliari Archaeology Museum, San Saturnino Basilica** (Night: Cagliari)
- Day 9: **Necropolis di Montessu, Sant'Antiocho Museum & Necropolis, Antas Temple** (Night: near beach)
- Day 10: All day at Piscinas dunes & beach (Night: Laconi)
- Day 11: **Nuraghe Isparas, Menhir Museum, Cabra Museum, Tharros** (Night: Oristano)
- Day 12: Bosa tour, **Nuraghe of San Antine, Necropolis Anghelu Ruju, Nuraghe Palmavera** (Night: Alghero)
- Day 13: Neptune's Grotto, Regional National Park Porto Conte, **Monte d'Accoddi, Saccargia Basilica, Olbia Museum** (Night: Olbia)
- Day 14: **Necropolis Li Muri, Giant's Tombs of Li Lolghi, Coddu Vecchiu, & Moru, Nuraghe La Prisgiona, Nuraghe Abucchio, Malchitta Complex, National Park Archipelago di la Maddalena** (Night: Overnight ferry to Civitavecchia)
- Day 15: **Ostia Antica** (Night: Rome)
- Day 16: **Colosseum, Roman Forum & Palatine Hill, Farewell Dinner** (Night: Rome)
- Day 17: Return to San Diego! ***Itinerary may change because of local conditions**



The Ancient Mediterranean World

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Anthropology 135S: Ancient Mediterranean World, September 2-18.
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9500 Gilman Drive, MC 0532
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The Ancient Mediterranean for the Adventurousome!

- **Tour 37 archaeological sites, and study Paleolithic, Neolithic, Bronze Age, Phoenician/Punic, Classical Greek, and Roman civilizations**
- **See important churches and castles of the Medieval period**
- **Visit eight museums dedicated to the peoples of the western Mediterranean, ca. 4000 BC – AD 1200**
- **Climb the Mt. Etna volcano, relax on beaches & sand dunes in Sicily and Sardinia, climb into sea grottos, and visit beautiful national parks**
- **Boat from Sicily to Sardinia, and Sardinia to the coast of Italy**
- **Enjoy fabulous Sicilian, Sardinian, and Roman food**
- **See Rome, the Eternal City**

The Ancient Mediterranean World – Sicily, Sardinia, & Rome Program Fees** Undergraduate and Graduate Students

Payment and Deadlines:

Program Fees = Hotels, Ground Transportation, Breakfasts & Lunches, Site Admissions\$2495**
Amount due in full after acceptance into the program and *no later than* Friday, June 8, 2018

** Eight or 12 units of credit are not included. You must pay tuition & Campus fee directly to UCSD Summer Session



2018 UCSD Summer Session Enrollment Form

Ancient Mediterranean—Sicily, Sardinia & Rome—ANAR 135S

Complete sections 1-12. Please type or print clearly. Limited space available. Submit application to:
Dr. Geoffrey E. Braswell, Dept. of Anthropology, UCSD, 9500 Gilman Drive, MC 0532, La Jolla, CA 92093-0532.

1. STUDENT INFORMATION

UCSD Student ID# _____

(Full legal name) Last First Middle

Address _____

City/State/Zip _____

() () @
Day Phone Evening Phone E-Mail Address

Birthday ___/___/___

Other Names on File at UCSD _____ Male ___ Female ___

2. PROGRAM FEE, TUITION, AND CAMPUS FEE (2-18 September, 2018)

Session	Course/Number	Grading Option	Fees/Tuition
Summer Session II	ANAR 135s ANTH 198	<input type="checkbox"/> Letter Grade <input type="checkbox"/> Pass/ No Pass	Undergrad/Grad
Program Fees: Hotels, two meals/day, ground transportation, all admissions In Addition, UCSD tuition of \$273/unit for 8 or 12 units + \$165.10 Campus fees*			\$2495.00 + \$2349 or \$3443
*Subject to change. Non-UC students and grad students pay more per unit.			

3. Statement of Purpose: Attach a one-page essay describing why you want to participate.

4. Physician's Report of Medical Examination: A form will be provided. Mail to the address on this form. Your physician must indicate you are in good health to participate.

5. Do you have any physical limitations that may affect your participation in this program?
No ___ Yes ___ If yes, please describe your special needs and submit with this enrollment form.
Do you have any dietary concerns that will affect your ability to participate in this program?
No ___ Yes ___ If yes, please describe your special needs and submit with this enrollment form.

6. Insurance: Proof of adequate medical insurance is required. Coverage is available from the UCSD Student Health Center, (858) 534-2123. A copy of your medical insurance card must be submitted to the Summer Session Office by June 8, 2018.

Name of Insurance Company _____ Phone _____
Policy Number _____ Policy Holder Name _____

7. Student Directory: I would like my name and contact information released to other students in the Program? Yes ___, or No ___ I do not want my contact information released.

8. Travel Documents: Participants are responsible for obtaining and bringing their passports, and, if required (for some non-U.S. citizens) for obtaining an Italian visa. Participants are advised that international travel is subject to both political and diplomatic conditions that are beyond control of the University. Travel to Italy not included in fees to UCSD.

9. Signature and Date: I have read and understand the rules for the 2018 Travel Study Summer Session Anthropology Program regarding enrollment and fees. I also understand I am responsible for travel arrangements, including flights to Catania and returning from Rome.

10. Student Status: (Check One)

- UCSD Undergraduate
- UCSD Graduate
- Teacher Education Program
- Attend other UC _____
- Attend 2-year College:

- Attend other 4-year College or University:

- I'm not currently a student

11. How did you hear about the study abroad program?

12. Payment:

Please wait until you have heard from Dr. Braswell that you have been accepted into the program. When you have been admitted to the program, you will be billed.

If you have not paid by June 8, 2018, you will forfeit your spot on the course.

Refunds will be made *only* to students who have lost their space on the course, and to all students in the case that the course is cancelled.

You are responsible for additional tuition and campus fees, payable to UCSD Summer Session (please see footnote on page above) and for purchasing an airplane ticket, as described in the Program Guide

X _____
Signature

Date _____



DEPARTMENT OF ANTHROPOLOGY

9500 GILMAN DRIVE DEPT 0532
LA JOLLA CALIFORNIA 92093-0532

**DEPARTMENT OF ANTHROPOLOGY AND SUMMER SESSION
AGREEMENT TO RELEASE THE DEPARTMENT OF ANTHROPOLOGY, ITS FACULTY AND STAFF,
AND AFFILIATED PROGRAMS FROM LIABILITY**

1. I _____, voluntarily agree to participate in the University of California, San Diego (herein
(Name of Student Releaser)
after referred to as UCSD) Department of Anthropology and Summer Session Travel Study Program in Sicily, Sardinia,
and Rome (UCSD courses ANAR 135s and ANTH 198) to be held September 2-18, 2018.
2. I am aware that participation in the event/activity described above in Paragraph 1 may be hazardous. I also
acknowledge that my participation in the event/activity is voluntary, and that I am participating with full knowledge of the
danger involved. I hereby agree to accept any and all risks of injury or death, and verify this statement by placing my
initials here: _____.
(Initials of Student Releaser)
3. I accept all financial burdens for any physical mishaps, accidents, or medical conditions that may arise as a result of
participating in the event/activity described in Paragraph 1, and agree that I, my assignees, heirs, legal representatives,
distributees, and guardians will not make a claim against, sue, or attach the property of UCSD or any of its agents,
officials, or employees, for costs related to medical or psychiatric treatment, emergency evacuation, or repatriation of my
mortal remains. By signing this release form, I _____, agree to accept all such potential
(Name of Student Releaser)
financial burdens.
4. As consideration for being permitted by UCSD, through its authorized agent, or through one of its affiliated
organizations, to participate in the event described above in Paragraph 1, I _____, hereby agree
that I, my assignees, heirs, distributees, guardians, and legal representatives will not make a claim against, sue, or attach
the property of UCSD or any of its agents, officials, or employees, for injury or damage resulting from the negligence or
other acts, howsoever caused, by any employee, agent, guest or invitee, or contractor of UCSD or any of its affiliated
organizations as a result of my participation in the event/activity described above in Paragraph 1. I further hereby release
UCSD, any of their agents, officials, employees or affiliated organizations from all actions, claims, or demands that I, my
assignees, heirs, distributees, guardians, and legal representatives now have or may hereafter have for injury or damage
resulting from my participation in the event/activity described above in Paragraph 1.
5. I accept all financial burdens for legal representation that I may require as a result of participating in the event/activity
described in Paragraph 1, and I agree that I, _____, my assignees, heirs, legal representatives,
(Name of Student Releaser)
distributees, and guardians will not make a claim against, sue, or attach the property of UCSD or any of its agents,
officials, or employees, for legal costs related to or incurred as a result of my participation in the event/activity described
in Paragraph 1.
6. I agree not to transport, buy, use, sell or otherwise engage in the traffic or consumption of illegal substances while
participating in the event/activity in Paragraph 1. By placing my initials here, I agree to maintain U.S. Government
standards of a Drug Free Work place while participating in the event/activity described in Paragraph 1: _____.
(Initials of Student Releaser)

7. The undersigned hereby authorizes the Regents of the University of California and their appointed agents to photograph, videotape, audio record, televise, duplicate and/or transfer to any present or future technology images and/or recordings of _____ while a participant in the event/activity described in
(Name of Student Releaser)

Paragraph 1. I agree that the Regents of the University of California, its authorized agents, employees, and assignees may use the photographs, videotapes, and/or audio recording prepared there from, to reproduce, exhibit, publish, or distribute in such a manner as they deem fit. No compensation will be paid for this use.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND UCSD AND/OR ITS AFFILIATED ORGANIZATIONS, INCLUDING BUT NOT LIMITED TO THE DEPARTMENT OF ANTHROPOLOGY AND SUMMER SESSION. I SIGN THIS AGREEMENT OF MY OWN FREE WILL.

Executed at _____, _____, _____, on _____, 2018.
(City) (State) (Country) (Month/Day)

STUDENT RELEASER

(Print Name)

(Signature)

WITNESS

I certify that _____ acknowledged in my presence that _____ read and fully
(Name of student releaser) (She/He)
understood the meaning and consequences of the foregoing release, and signed it in my presence.

Executed at _____, _____, _____, on _____, 2018.
(City) (State) (Country) (Month/Day)

(Print Name of Witness)

(Signature of Witness)

(Typed or printed name and address)

Phone Number: () _____



UCSD SUMMER SESSION

9500 GILMAN DRIVE DEPT 0179
LA JOLLA CALIFORNIA 92093-0179

WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT

Participant's Name: _____
(Please Print)

Waiver: In consideration of being permitted to participate in a UCSD Summer Session sponsored Travel Study Program, hereinafter referred to as "The Program," I hereby certify that I understand and agree with the following terms of my participation in The Program. I for myself, my heirs, personal representatives or assigns, **do hereby release, waive, and covenant not to sue** The Regents of the University of California, its officers, employees, and agents from liability **from any and all claims including the negligence of The Regents of the University of California, its officers, employees, and agents**, resulting in personal injury, accidents or illnesses (including death), and property loss arising from, but not limited to, participation in The Program.

Signature of Participant (Student) Date ANAR 135S, ANTH 198 Summer Session 2018
Travel Study Program (Sicily, Sardinia, & Rome)

Assumption of Risks: Participation in The Program carries with it certain inherent risks that cannot be eliminated regardless of the care taken to avoid injuries. The specific risks vary from one activity to another, but the risks range from: (1) minor injuries such as scratches, bruises, and sprains; (2) major injuries such as eye injury or loss of sight, joint, or back injuries, heart attacks, and concussions; to (3) catastrophic injuries including paralysis and death. I have read the pre-departure material and I understand that while representatives of UCSD Summer Session will make every effort to assist me in the event of emergency, responsibility for my safety and welfare is mine alone. Moreover, I accept any and all financial burdens that may result from such injuries or accidents related to my participation in The Program.

I have read the previous paragraph and I know, understand, and appreciate these and other risks that are inherent in The Program. I hereby assert that my participation is voluntary, informed, and that I knowingly assume all such risks.

Indemnification and Hold Harmless: I also agree to INDEMNIFY AND HOLD The Regents of the University of California HARMLESS from any and all claims, actions, suits, procedures, costs, expenses, damages, and liabilities, including attorney's fees brought as a result of my involvement in The Program and to reimburse them for any such expenses incurred.

Severability: The undersigned further expressly agrees that the foregoing waiver and assumption of risks agreement is intended to be as broad and inclusive as is permitted by the law of the State of California and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

Acknowledgment of Understanding: I have read this waiver of liability, assumption of risk, and indemnity agreement, fully understand its terms, and **understand that I am giving up substantial rights, including my right to sue.** I acknowledge that I am signing the agreement freely and voluntarily, and **intend by my signature to be a complete and unconditional release of all liability** to the greatest extent allowed by law for all claims and demands or liabilities which I or my heirs, representatives, executors, administrators, or any other persons acting on my behalf may have against The Regents by reason of any acts of war, armed conflicts, terrorism, other civil uprisings, accident, illness, or injury or other consequences arising or resulting directly or indirectly from my participation in The Program and occurring during The Program, any air flights or other travel associated with The Program, or any time subsequent thereto.

It is the intention of the undersigned by this instrument, to exempt and relieve The Regents of the University of California from liability for personal injury, property damage, or wrongful death.

Signature of Participant (Student) Date Birthdate (mo/day/yr)

Please indicate person to notify in case of emergency: _____ Telephone _____
Relationship _____ Address _____

**UCSD 2018 Ancient Mediterranean— (ANAR 135s & ANTH 198)
STUDY ABROAD IN SICILY, SARDINIA & ROME**

Physician's Medical Examination for Eligibility

Student Name

Student I.D. Number

This person is an applicant for a 17-day study abroad program in Italy offered by UCSD. The program requires visiting archaeological sites, some of which are near sea-level and in hot (98°F) and humid environments, others of which are at high altitude (2500 m). Students may walk up to 5 miles per day, including at high altitude. No hiking or carrying of heavy loads is required, and all the sites are official parks open to tourists. Please note that Italy does *not* provide disability access as required in the U.S.A. by the Americans with Disabilities Act.

Physician's Report of Medical Examination: Please check the items below if they are considered ABNORMAL. Indicate under "Remarks" the pertinent details and your impression of their importance.

A. Standard Physical Examination _____ Past History _____ Present History

B. Special Attention Areas _____ Past History _____ Present History

_____ Ears and Sinus

_____ Respiratory System

_____ Cardiovascular System

_____ Physical Fitness

_____ Life Threatening Allergies, Asthma, and Emphysema

_____ Emotional and Psychological Stability

_____ Other

Physicians Remarks:

_____ Approval (I find no conditions that I consider incompatible with this program.)
_____ Disapproval (The applicant has conditions that, in my opinion, constitute unacceptable hazards.)

(Please Print)

Physician's Name: _____ 'Phone (Business): _____
Address: _____ City/State/Zip: _____

Physician's Signature: _____
Date: _____



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**DEPARTMENT OF ANTHROPOLOGY AND SUMMER SESSION
AGREEMENT TO PAY ALL PROGRAM FEES, TUITION, AND CAMPUS FEE UPON REGISTRATION**

The Summer Session courses *ANAR 135S, Study Abroad: The Ancient Mediterranean* has an associated program fee of \$2495. This special fee pays for hotels; ground transportation in private vehicles and on boats; all breakfasts and lunches as well as two dinners; and admission to all the archaeological sites, museums, and attractions we will see during the course. It does not include Summer Session tuition and fees.

I understand that when my application (consisting of an application form and essay, two liability waivers, a medical form, and this agreement form) is approved, I must pay the program fee of \$2495. Payment must be made to the Cashier's Office at UCSD by June 8, 2018.

Upon approval of my application, I will be cleared for registration and may do so online. After being accepted into the program and paying the special program fee, ***I understand that there will be no reimbursement, partial or complete, of the program fee of \$2495*** if I later decide to drop out of the study abroad program.

I have read and understand this document.

STUDENT SIGNATURE: _____

DATE: _____, 2018

PRINTED NAME: _____