

SITE:

TRENCH/SQUARE

QUADRAT/AREA:

SPIT/LEVEL/CONTEXT:

DATE:

RECORDER/S:

Start Heights:

End Heights:

WEIGHTS

Quadrat/Area	Total	Coarse	Fine

Soil pH:

Soil Colour:

Quadrat/Area	Comments/Description	Please describe aspects of deposits in this order:
		<p>Compaction</p> <p>Composition/ Particle size</p> <p>Inclusions</p> <p>Thickness & extent</p> <p>Other comments</p> <p>Method & conditions</p>
		<p>FINDS:</p> <p><input type="checkbox"/> None</p> <p><input type="checkbox"/> Stone</p> <p><input type="checkbox"/> Wood</p> <p><input type="checkbox"/> Seeds</p> <p><input type="checkbox"/> Ceramic</p> <p><input type="checkbox"/> Glass</p> <p><input type="checkbox"/> Bone</p> <p><input type="checkbox"/> Metal</p> <p><input type="checkbox"/> Plastic</p> <p><input type="checkbox"/> Other:</p> <p>.....</p> <p>.....</p>
		<p>PHOTOS:</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
		<p>SAMPLES:</p> <p><input type="checkbox"/> None <input type="checkbox"/> Bulk</p> <p><input type="checkbox"/> Soil</p> <p><input type="checkbox"/> Material for dating (please specify)</p> <p>.....</p> <p><input type="checkbox"/> Other:</p> <p>.....</p>