

# CONTEXT SHEET

Date <u>10/8/17</u>	Excavator <u>PT/LB</u>	Excavation Area <u>A2</u>	Context: <u>(2003)</u>
Context Type: <input type="checkbox"/> Cut <input checked="" type="checkbox"/> Fill <input checked="" type="checkbox"/> Layer <input type="checkbox"/> Wall <input type="checkbox"/> Other: _____			Complete?

  

<p><u>Deposit:</u> Compaction, colour, composition, particle size, inclusions, thickness and extent, comments, method &amp; conditions</p> <p><u>Cut:</u> Shape in plan, corners, dimensions/ depth, break of slope at top, sides, break of slope at base, base, orientation, inclination of axis, truncated (if known), fill #'s, comments</p> <p><u>Layers:</u> Compaction, colour, composition, particle size, inclusions, thickness and extent, comments, method and conditions</p> <p><u>Walls:</u> Shape in plan, dimensions, orientation, construction method, construction material further description</p>	VOID
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<p><b>Stratigraphic Matrix</b></p> <p>Is cut/ filled by <u>(2001)</u> <u>(2004)</u> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>This context is <u>(2003)</u> Abuts: <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Cuts/ fills <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>	<p><b>Boundary to context above is:</b></p> <p><input type="checkbox"/> Sharp <input type="checkbox"/> Clear  <input type="checkbox"/> Diffuse/gradual  <input type="checkbox"/> Unclear</p> <p><b>Boundary to context below is:</b></p> <p><input type="checkbox"/> Sharp <input type="checkbox"/> Clear  <input type="checkbox"/> Diffuse/gradual  <input type="checkbox"/> Unclear</p>
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<p><b>Interpretation</b></p>	
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<p><b>Finds frequency</b></p>	<p><input type="checkbox"/> Very frequent    <input type="checkbox"/> Frequent (every trowel/brush)    <input type="checkbox"/> Average (every 2nd trowel/ brush)  <input type="checkbox"/> rare (ca. every 5th trowel/ brush)    <input type="checkbox"/> Sterile</p>
<p><b>Finds</b></p>	<p><input type="checkbox"/> Ceramics    <input type="checkbox"/> Chipped stone    <input type="checkbox"/> Ground stone    <input type="checkbox"/> Bone    <input type="checkbox"/> Worked bone  <input type="checkbox"/> Human bone    <input type="checkbox"/> Other: _____</p>
<p><b>Finds association</b></p>	<p><input type="checkbox"/> Undisturbed since deposition (in situ)    <input checked="" type="checkbox"/> Recently disturbed    <input type="checkbox"/> other: _____</p>

  

<p><b>Photo #'s</b></p>	
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