

CELL AND DEVELOPMENTAL BIOLOGY

lab rotation 2/2005

Laboratory Rotation Evaluation

STUDENT'S NAME _____

ROTATION MENTOR _____

DATE SUBMITTED _____

ROTATION (please mark one; see *CDB Program Handbook*, Laboratory Rotations, for additional information)

<u>11-Week Rotations</u>	<u>Semester Rotations</u>
<input type="checkbox"/> 1 of 3	<input type="checkbox"/> 1 of 2 (Fall Semester)
<input type="checkbox"/> 2 of 3	<input type="checkbox"/> 2 of 2 (Spring Semester)
<input type="checkbox"/> 3 of 3	

EVALUATION

	Excellent	Good	Average	Below Average
Communication Skills				
Ability to organize facts and ideas				
Motivation				
Reliability				
Ability to handle stress				
Ability to interact well with colleagues				
Ability to function independently				
Bench skills				
Ability to design well-controlled experiments				
Ability to interpret data				

Circle one:

Yes / No Attended and participated in lab meetings.

Yes / No Apparently attended appropriate seminars.

Yes / No Apparently read about relevant research in current journals, etc.

Please answer the following questions on a separate sheet and attach to this form.

1. Briefly describe the rotation project.
2. Was sufficient progress made toward the initial goals? Please elaborate.
3. Describe strengths of this student's research and abilities.
4. Describe weaknesses of this student's research and abilities.
5. Based on your observations, will this student be ready to begin thesis research by the end of Year-2? Please elaborate.
6. Based on your observations, will this student be able to complete a Ph.D. thesis project? Please elaborate.
7. Evaluation of rotation talk.
8. Overall evaluation / additional comments.

GRADE _____

REVIEW

Was this evaluation reviewed with the student? _____Yes _____No

_____ Student's initials (indicating evaluation was reviewed)