

Rotation Grade: _____

LAB ROTATION EVALUATION FORM

This form is to be filled out by the lab rotation advisor after the rotation student has completed a rotation. The lab rotation is noted on the transcript as IM 7060 – Independent study and graded as a course unit. Lab rotation grades are as follows:

S Satisfactory

U Unsatisfactory

Please return this form to April Wolak (awolak@wayne.edu) no later than one week after the rotation student has completed a rotation.

Rotation Advisor Name: _____

Date: _____

Student Name: _____

Rotation Duration: Start Date: _____ End Date: _____

Ratings (1 to 5 with 5 being best)

Responsible, shows up to lab _____

Works hard when in lab _____

Understands what he/she is doing and can summarize _____

Can execute experiments with minimal guidance _____

Strengths of this student in the lab:

Please discuss what this student should work on to be successful in the PhD program:

Would you take this student into your lab? _____ yes _____ no _____ undecided

Rotation Advisor Signature

Date