## Evaluation of Research Rotation Student Summary Report

Student Name: $\qquad$ Program: $\qquad$
Rotation
Instructor: $\qquad$ Term: $\qquad$ Academic Year: $\qquad$

## Summary of Rotation Project

The student will write a rotation summary/report of the progress made and the challenges faced during the rotation.

Evaluation of Research Rotation Mentor Evaluation

Student Name: $\qquad$
Rotation Instructor:

Program: $\qquad$
Term: $\qquad$ Credits/Hours per week in the lab: $\qquad$

The student should attach a written one-page description/progress report of the research project. The checklist should be completed by the major advisor and discussed with the student. Comments should be constructive.

Did the student give a presentation at the end of the rotation?
a Yes
a No

| Evaluation Checklist | Excellent <<<<<<<>>>>>>> Poor |  |  |  |  | Unable to Evaluate |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | 1 | 2 | 3 | 4 | 5 |  |
| Ability to follow instructions | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |
| Ability to design experiments | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |  |
| Ability to carry out experimental protocols | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | O |
| Technical ability in laboratory | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |  |
| Evaluation of data/Interpretation of Results | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | O |
| Record-keeping | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |
| Effort applied to project | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |
| Interest level | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |
| Improvement during rotation | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |
| Communication skills | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |
| Interaction with laboratory personnel | $\bigcirc$ | 0 | 0 | $\bigcirc$ | 0 | $\bigcirc$ |
| Overall Evaluation | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ | $\bigcirc$ |  |

## Overall Grade Assignment: OPass OMarginal Pass OFail

## Area(s) of strength:

## Area(s) needing improvement:

## General comments:

## Evaluation Agreement

Both parties acknowledge this evaluation was discussed prior to submission.

| Rotation Instructor <br> Signature: | Student Signature: |
| :--- | :--- |
| Evaluation Completion Date: |  |

