Rotation Evaluation Form

Please complete form and submit to pathobiology@brown.edu

Student Name:

Mentor Name:

Evaluation Date: Rotation Start Date: Rotation End Date:

Recommended Grade:

Evaluation	Unable to judge	Needs Improvement (work is at the level of an undergraduate student)	Meets Expectations (work is at the level of a 1st-year graduate student)	Exceeds Expectations (work is at the level of a more senior graduate student)
Ability to design experiments	☐	☐	☐	☐
Bench work (may not apply)	☐	☐	☐	☐
Analytical skills	☐	☐	☐	☐
Work ethic	☐	☐	☐	☐
Lab/research meeting participation	☐	☐	☐	☐
Communication/interpersonal skills	☐	☐	☐	☐
Notebook	☐	☐	☐	☐
Attendance (in the lab or otherwise)	☐	☐	☐	☐
Attitude and intellectual involvement	☐	☐	☐	☐
Grasp of new concepts/self-sufficiency	☐	☐	☐	☐
Overall evaluation	☐	☐	☐	☐

Project Title/Description:

Faculty evaluation of student strengths and weaknesses:

Comment on the student's strengths and weaknesses, with suggestions for how to improve in areas of weakness. In addition, comment on the quality of any of the student's written reports or oral presentations.