

Due: After Rotation

**DEPARTMENT OF PATHOLOGY
GRADUATE PROGRAM IN PATHOBIOLOGY
STUDENT EVALUATION OF RESEARCH ROTATION**

PRECEPTOR:	EVALUATOR:
MONTHS/YEAR EVALUATED:	ROTATION: SUMMER
TITLE OF PROJECT:	

1. GOALS/EXPECTATIONS:

	Yes	No
Were the goals/expectations of the rotation explained to you at the beginning of the rotation?		
If yes, by whom (name & position in lab)?		
Briefly summarize what they were:		
Did you express your goals/expectations of the rotation to the preceptor?		
If they differed from goals/expectations summarized above, briefly explain what they were:		
Were the goals/expectations of the rotation met by both parties?		
If NO, why not? Explain:		

continued...

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2. EVALUATION OF RESEARCH EXPERIENCE:

CODES: 1 – Unsatisfactory; 2 – Marginal, needs improvement; 3 – Average; 4 – Above Average; 5 – Outstanding; CC – Cannot Comment						
<i>Please check ✓ the suitable code for each question below:</i>	1	2	3	4	5	CC
Availability of Preceptor:						
Access to resources needed to pursue your research career:						
Interaction with other laboratory personnel:						
Involvement in formal laboratory activities (journal clubs, lab group meetings, etc.):						
List the major STRENGTHS of this rotation:						
List the major WEAKNESSES of this rotation:						
					Yes	No
I would recommend this ROTATION to another student:						
If NO, why not? Explain:						
Name of Evaluator:						
Date:						

Please return completed form to Tracie McElroy, Ross 558.