

Rotation Evaluation Form

**If your comments do not fit in the spaces provided you can attach a letter with the form.*

Student Name: _____

Rotation Dates: _____

Rotation Advisor: _____

Advisor's Email: _____

Advisor's Department: _____

Advisor's Phone: _____

Description of Rotation Project:

Evaluation of Students Performance (options are excellent, good, satisfactory and needs improvement)

General Knowledge: _____

Independence: _____

Work Accomplished: _____

Time Commitment: _____

Perseverance: _____

Interactions with Lab Group: _____

Comments/Recommendations for Student Improvement:

Would you consider being the student's dissertation advisor? (This does not commit you to taking this student) Yes No

Advisor's Signature and Date