

LAB ROTATION EVALUATION

Lab Rotation Information:

Students are required to submit this form to the faculty member in charge at the *beginning* of the rotation. Faculty will fill out the form and return it to the Student Services Office at the end of the rotation.

Student's Name: _____ Date _____

Faculty: _____ Semester/Summer _____

Faculty: Please answer the following questions and write a brief evaluation of this student's performance in your lab. This form should be returned to the Student Services Office, OML 101A.

A. Brief description of faculty and student expectations of rotation.

1) How would you rate the student's preparedness for work in your lab upon entry ?

Excellent

Adequate

Not Adequate

Justify:

2) How would you rate the student's performance during rotation in your lab?

Excellent

Adequate

Not Adequate

Justify:

3) How would you rate the student's preparedness for future work based on skills learned during rotation?

Excellent

Adequate

Not Adequate

Justify

B) Reflecting A above, a brief faculty description of work done by student upon completion of rotation.

Faculty Signature

Date