

ROTATION EVALUATION FORM

Rotation Student: _____ Professor: _____

Rotation Period Dates: _____

The following categories are designed to help you in the evaluation of this student. Use a letter grade, A-F, for each quality which you are able to evaluate based upon your observation during the rotation period.

_____ Proficiency and accuracy in lab work

_____ Motivation and enthusiasm for research

_____ Independent critical thinking about the project (evidence of creativity)

_____ Background knowledge of theory and literature in project area

_____ Background knowledge of techniques in project area

_____ Acquiring good background on project during rotation

_____ Analytical skill in interpreting data obtained during rotation

_____ Keeping a careful and well organized lab notebook

_____ Interest in discussing assigned project

_____ Interest in discussing other projects in the laboratory

_____ Regularly asking questions in the laboratory

_____ Quality of data

_____ Perseverance

Comments:

Date: _____

Faculty Signature _____ Student Signature _____

Please complete this evaluation at the end of the rotation and return to the College of Veterinary Medicine Office of Graduate Education, S3-016 Schurman Hall, Box 38, or via email to Graduate Education Coordinator, bbscornell@cornell.edu