

GSBSE Student Rotation Report

Student Name:	
Rotation Start Date:	
Rotation End Date:	
Faculty Advisor of Rotation Laboratory:	
Number of Rotations Completed (including this one):	

I. Research Accomplishments

I.A. Describe the objectives of the rotation research project:

I.B. Provide a summary of the research project and your achievements during the rotation.

II. Student Evaluation of the Rotation Experience

II.A. Was this rotation a valuable learning experience?

II.B. Were your expectations for the rotation met?

II.C. Were you provided ample resources to carry out and complete your rotation project?

II.D. Evaluate the direction and guidance you were given by the faculty and laboratory personnel.