

Master in Biomedical Sciences Rotation Evaluation form

This form is to be filled out by the faculty rotation advisor after the rotation is completed. It is not necessary to show it to the student. The student's Graduate Coordinator will meet and discuss the evaluation with the student if needed.

Student			
Name:	Email:		
Mentor		Program (circle one)	
Name:	Biochem	M&I	Neuroscience
	Pathology	Pharm	Regen Med
Please rate the student on the following (circle one)			
Responsible. Shows up to lab when expected. Emails or calls when unable to arrive as expected.	Satisfactory	Unsatisfactory	
Works hard when in lab. Keeps clear and complete lab notes.	Satisfactory	Unsatisfactory	
Understands what he/she is doing, can summarize the purpose and results of experiments	Satisfactory	Unsatisfactory	
Exhibits <i>potential</i> to perform experiments independently	Satisfactory	Unsatisfactory	
Shows curiosity, communicates effectively with mentor and colleagues, attentive in lab meetings	Satisfactory	Unsatisfactory	
Would you take this student into your lab?	Yes	No	Undecided
If not, please explain.			
Mentor signature			
Grad Coord signature			

Please turn in to Laura Kasman by email (kasmanL@musc.edu) or campus mail (MSC 504) or in person (BSB 208F).