Form C3b-ROTATION REPORT

Name: _______________________________

Date¹: _____________________________  Rotation: [ ] #1; [ ] #2; [ ] #3

A. Describe your experience in the space below (Continue on the back of this form if necessary.)

B. Comment on the student’s performance during his rotation in your research group:

____________________________________  GRADE:   PS ____  PN ____  PB ____  NP ____

Professor’s Name

____________________________________  ______________________________________

Professor’s Signature

¹ Parts A & B are to be completed by the student and the professor, respectively. This form is due at the CGP office the LAST THURSDAY of the month of the rotation.