Chemistry Graduate Program

Form C3b- Research Lab Rotation Report (Quim8999)

Student Name

Student Number

Date:_______________________________     Rotation: [ ][#1;[ ][#2; [ ][#3

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

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

GRADE: PS___ PN___ PB___ NP___

Professors’s Name and Signature

Date

Parts A & B are to be completed by the student and the rotation professor, respectively. This form is due at the coordinator’s office one week after the completion of the rotation.