Microbiology 6789

Laboratory Rotation Agreement Autumn 2023 – Spring 2024

Student:			Faculty member:	
Numb	er of Hours Enrolled in 6789	9:Estir	mated hour/week student available for rota	tion:
	ION 1: EXPECTATIONS etion should be filled out by the fac	culty member in co	nsultation with the student at the beginning of the r	rotation.
1.	Reading Relevant Literature:			
2.	Experimental Work:			
3.	Research Meetings:			
4.	Student Presentations:			
5.	Time in the Laboratory:			
My laboratory is currently funded, at least in part, through extramural research grants and/or contracts. Yes No (If "No", please indicate status of pending proposals.)				
I have d	iscussed with this student the mea	ans of support typica	ally available for doctoral studies in my laboratory.	Yes No
Student	t Signature	Date	Faculty Signature	Date
	ION 2: ACCOMPLISHMEN tion should be filled out by the stu			
1.	. Approximate average hours/week of participation in rotation:			
2.	2. Describe direct participation in research work (use additional pages if necessary):			
3.	Briefly describe outside reading/literature study (use additional pages if necessary):			
4.	Describe presentations in research group meetings:			
5.	Approximate time spent with the rotation advisor (faculty member):			
6.	Approximate time spent with other trainers in the lab (students/postdocs/techs):			
7.				
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Student	t Signature:		Date:	
SECTI	ON 3: FACULTY EVALUA	TION		
Student	has participated in the above activ	vities:Agr	reeDisagree	
	iscussed potential opportunities/su comments / recommendations for		aduate work in my laboratory:YesNo	
Faculty	Signature:		Date:	
At the en Building	d of the rotation, the student should su	ubmit the completed for otation advisor. If there	orm to Kendra Rowell in the Microbiology Office (105 Bio re are any questions or concerns, the student and/or advisor	logical Sciences

Department of Microbiology | Rev: 10/2023