Microbiology 6789

Laboratory Rotation Agreement Autumn 2019 – Spring 2020

Student:			Faculty member:		
Numbe	er of Hours Enrolled in 6789:_	Estiı	mated hour/week student available for rota	tion:	
	ON 1: EXPECTATIONS tion should be filled out by the facult	ty member in co	nsultation with the student <i>at the beginning of the r</i>	otation.	
1.	Reading Relevant Literature:				
2.	Experimental Work:				
3.	Research Meetings:				
4.	Student Presentations:				
5.	Time in the Laboratory:				
-	ratory is currently funded, at least in ndicate status of pending proposals.)	part, through ex	tramural research grants and/or contracts. Yes	No (If "No",	
I have d	iscussed with this student the means	of support typic:	ally available for doctoral studies in my laboratory.	Yes No	
Student	Signature	Date	Faculty Signature	Date	
	ON 2: ACCOMPLISHMENTS tion should be filled out by the stude Approximate average hours/week of	nt <i>after the rota</i>			
2.					
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.	Participation in other pertinent acti				
Student	Signature:		Date:		
SECTI	ON 3: FACULTY EVALUATI	ON			
			Disagraa		
	has participated in the above activitie				
	iscussed potential opportunities/supp comments / recommendations for the		aduate work in my laboratory: <u>Yes</u> No		
Faculty	Signature:		Date:		

At the end of the rotation, the student should submit the completed form to Natasha Little in the Microbiology Office (105 Biological Sciences Building), keep a copy, and give a copy to the rotation advisor. If there are any questions or concerns, the student and/or advisor are encouraged to contact Chad Rappleye (7-2718; rappleye.1@osu.edu).