**Ph.D. Program in Biological Sciences in Public Health**



**2023-2024 Rotation Evaluation Form**

This form is to be completed by the rotation lab supervisor. Complete the form electronically, sign it, and email to Eric Creighton at ecreighton@hsph.harvard.edu. Grades and credit for rotations will not be assigned until this form is submitted to the BPH Program Office.

**STUDENT’S NAME:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BPH Department Affiliation of Lab:

Head of Lab:

Daily Supervisor (if different):

[ ]  Rotation Period One: *July 17 to September 20, 2023*

[ ]  Rotation Period Two: *October 2 to December 8, 2023*

[ ]  Rotation Period Three: *January 8 to March 8, 2024*
[ ]  Rotation Period Four: *March 18 to May 10, 2024*

 Excellent Very Good Average Poor

Technical Skills [ ]  [ ]  [ ]  [ ]

Lab Attendance [ ]  [ ]  [ ]  [ ]

Communication Skills [ ]  [ ]  [ ]  [ ]

Knowledge of Subject [ ]  [ ]  [ ]  [ ]

**Final grade:** [ ]  A [ ]  A- [ ] B+ [ ]  B [ ]  B- [ ]  C or lower

Please comment on the skills learned and the progress made during this rotation and the student's strengths and weaknesses. Have you observed any gaps in knowledge? Do you have recommendations for further training?

Would you consider offering this student a place in your lab for his/her dissertation work? If no, please state why.

Head of Lab Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_\_

Lab Supervisor Signature (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date: \_\_\_\_\_\_\_\_