BIOPHYSICS ROTATION
EVALUATION FORM

Student Name: ________________________________

Faculty Name: ________________________________

Dates of Rotation: ____________________________

Please evaluate this student, based on your observations during the rotation period. Use a letter grade, A-F, in each category.

_____ Proficiency and accuracy in laboratory work
_____ Motivation and enthusiasm for research
_____ Independent critical thinking about the project (evidence of creativity)
_____ Perseverance
_____ Analytical skill in interpreting data
_____ Regularly asking questions

_____ Overall letter grade for rotation

Comments:

Date: _______________________________________

Faculty Signature: _____________________________

Student Signature: _____________________________

Please complete this evaluation at the end of the rotation and return to the GFAs - biophysics@cornell.edu