



Neuroscience PhD Program
Laboratory Rotation Evaluation Form (NEUR 5374)

Date:

Your Name:

Mentor's Name:

Evaluation Period: Rotation 1

Rotation 2

Were the expectations and objectives of your rotation made clear to you?

How much did you interact with your mentor? Did the extent of this interaction work for you?

Were you satisfied with the laboratory environment? What if anything could improve the experience?

Would you recommend this lab to future Neuroscience PhD students?

Do you have other comments?

Signature