

# Computational Biology & Medicine

## CBM Rotation Evaluation Form for Faculty Members

Please evaluate the performance of the CBM student during the rotation in your lab. Please submit this completed form to Margie Mendoza at [mah2036@med.cornell.edu](mailto:mah2036@med.cornell.edu) within one week of the completion of the rotation period. Thank you!

Student: \_\_\_\_\_ Rotation Start: \_\_\_\_\_ End: \_\_\_\_\_

Faculty: \_\_\_\_\_ Institution: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Please rate students on the following criteria:	Poor	Acceptable	Good	Excellent
Laboratory skills				
Understanding of rationale for experiments				
Ability to apply knowledge				
Ability to reason critically				
Ability to function independently				
Responsibility & maturity				
Motivation				
Creativity				
Relationships with laboratory personnel				
Potential for career in biomedical research				
<b>Overall evaluation</b>				

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**Rotation project title:**

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**Brief description of rotation project:**

**Detailed comments regarding student's performance:**

**Faculty Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Faculty Name:** \_\_\_\_\_