

**Program in Epidemiology and Human Genetics**

**Research Rotation Evaluation Form (mentor)**

**Students:** Please complete this form and forward it to the Epidemiology and Human Genetics academic office at jshinnick@som.umaryland.edu

**Student Name:** Click or tap here to enter text. **Date:** Click or tap to enter a date.

**Mentor Name:** Click or tap here to enter text.

**Rotation Dates:** Click or tap here to enter text.

**Please describe the duties performed by the student:** Click or tap here to enter text.

**Were these duties performed satisfactorily?** [ ] **Yes** [ ] **No**

**The skills that the student learned during this rotation included:** Click or tap here to enter text.

**On a scaled of 1-5 (with 5 being the highest), how would you rate the student’s overall performance:**

**1** [ ]  **2** [ ]  **3** [ ]  **4** [ ]  **5** [ ]

**Additional Comments:** Click or tap here to enter text.

**Signature:** Click or tap here to enter text. **Date:** Click or tap to enter a date.

***Please submit this form using your UMB account.***