

海洋生物科技博士學位學程- Lab Rotation 評量表

99. 04. 19 經 98 學年度第二學期第 2 次學程會議訂定

Student: _____ Class of _____ (Year)

PI: _____ Rotation Time: from _____ to _____

Please evaluate the student in each category as follows: Excellent (1), good (2), fair (3), poor (4), not applicable (N/A)

- Spends adequate time in the laboratory to accomplish research goals
- Understands central questions and procedures of the lab
- Works with a reasonable level of proficiency
- Observes safe laboratory practices
- Keeps adequate laboratory records
- Ability to evaluate experimental results
- Receptiveness to suggestions and critical comments
- Capacity for self expression and communication
- Ability to get along with co-workers
- Results of the Study Project

Comments:

(Please use back of this form, if more space is needed.)

If adequate space and funding are available, would you be willing to accept this student into your laboratory? (Yes/No) _____

Recommend final score: _____ (0-100, pass: >70)

Please sign in the column when you first review this list with the student at the **beginning** of the rotation

Signature of Student/ Date

Signature of Rotation Advisor/ Date

Please sign in the column when the evaluation is **complete**, and the student has reviewed it.

Signature of Student/ Date

Signature of Rotation Advisor/ Date

※ Please return the completed form to the office of Doctoral Degree Program in Marine Biotechnology at FAX:07-5256205 within 2 weeks after the lab rotation ends.