

Bioscience PhD Programs Rotation Verification Form

To the student: To receive credit for completing your rotation, obtain both signatures indicated below and **return this form and a copy of your rotation report to the Bioscience PhD Programs Office.**

Rotation Dates: _____

Student: _____

The above named student has completed a satisfactory rotation in my laboratory and has prepared a satisfactory rotation report.

Rotation Faculty: _____

Rotation Faculty Department: _____

I have met with the student and discussed any pertinent issues.

Academic Advisor: _____

Optional Comments