

ROTATION ENROLLMENT FORM

Student Name: _____

Start of Rotation: _____

This form must be signed by the professor who is supervising the rotation project and by the student's advisor.

As Principal Investigator of this laboratory, I agree to develop a research project for this student and arrange for all training necessary to perform the project.

PI's Name (please print) _____

PI's Signature _____ Date _____

PI's Department _____

Advisor's Name (please print) _____

Advisor's Signature _____ Date _____

I have submitted a Faculty Letter of Intent.

* Please inform your primary advisor of what courses you have signed up for. Incomplete rotation forms will not be accepted.

Original: Student file

cc: Lab PI
Advisor