

This form is to be submitted <u>prior</u> to the start of your rotation. You may complete the form <u>electronically</u>, then print for the signature of the lab head, and submit to Jelena Follweiler (<u>itillots@hsph.harvard.edu</u>, Building 2, Room 408). Grades and credit for rotations will not be assigned until this form is submitted.

Student's Name:	Graduate Entry Year:
Rotation: Start Date: End Date	ə:
	re required to register for BST 316 (Quantitative Genomics Laburs of work per week for 16 weeks or about 12 hours of work
Head of Lab:	Department Affiliation:
Daily Supervisor (if different):	
Lab Address:	
Faculty Email Address:	
Research Involves: Vertebrate Animals: Ye	es 🗌 No Human Subjects: 🗌 Yes 🔲 No
Title of Project:	
Brief description of the rotation project (up to \underline{t}	hree to four sentences per category):
Aims / Hypothesis:	
Methods/Approaches:	
Goals of this Rotation:	
Student Signature:	Date:
Head of Lab Signature:	Date:
Daily Supervisor Signature (if different):	Date:
Program Director Signature:	Date: