MMG Rotation Agreement Form

Student Name: 
Rotation Mentor Name: 
Office Number: 
Lab Number: 

<table>
<thead>
<tr>
<th>Rotation</th>
<th>Rotation Form Due</th>
<th>Rotation Period</th>
<th>Duration</th>
<th>Final Report Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Monday, Sep. 21</td>
<td>Monday, Sep. 21 – Friday, Nov. 13</td>
<td>8 weeks</td>
<td>Friday, Nov. 20</td>
</tr>
<tr>
<td>2</td>
<td>Friday, Dec 11</td>
<td>Monday, Jan. 4- Friday, Feb. 26</td>
<td>8 weeks</td>
<td>Friday, Mar. 5</td>
</tr>
<tr>
<td>3</td>
<td>Friday, Mar. 5</td>
<td>Monday, Mar. 8 – Friday, April 30</td>
<td>8 weeks</td>
<td>Friday, May 7</td>
</tr>
<tr>
<td>4</td>
<td>Friday, May 7</td>
<td>Monday, May 10th- TBD (discuss w/ DGS)</td>
<td>TBD</td>
<td>TBD</td>
</tr>
</tbody>
</table>

1. Mentor and student have discussed possible rotation projects.
2. There is space and appropriate resources available in the lab during this period for the student.
3. Mentor will devote the time necessary to provide a quality learning experience for this student.
4. Mentor agrees to give a grade and brief statement of performance to the DGS based on both the lab work conducted and the written report submitted by the student regarding the research performed during the rotation.
5. Rotation agreements may be subject to approval by the MMG Executive Committee.

Student Signature ____________________________ Date ____________

Rotation Mentor Signature ____________________________ Date ____________

DGS Signature (Shonna McBride) ____________________________ Date ____________

Return this completed form and the Final Report by the due dates listed above to the Program Administrator in by email (rathan.kersey@emory.edu).

Please note: The Final Report should also be submitted to your rotation mentor and the MMG DGS by the due date.

Revised 7/7/20