

Research Block Elective
 School of Medicine
 University of California, San Francisco
 STUDENT EVALUATION

 Student Name

 Course (Department and Course Number)

 Faculty Research Mentor Name

 Quarter, Block and Year

 Faculty Research Mentor Signature

Student Grade:

Pass Incomplete F

Reason (if non-passing grade) _____

Numerical Ratings: (Please enter a number rating of 1, 2, 3, 4, or X for each competency)

KEY: 1 = problem 2 = concern 3 = adequate 4 = excellent X = not observed/not applicable

A. Research Skills & Progress	Rating		Rating
1) Use of Scientific Literature		7) Attributes and Responsibility	
2) Analytic Approach		8) Self Improvement	
3) Independence/Perseverance		9) Potential for a scientific career	
4) Interaction with other members of the lab/group		10) Other (write in)	
5) Presentation Skills			
6) Scientific development during this research block			

***Note: please address scores of 2 or below in Constructive Comments Section.**

Summary Comments: (required) Please provide 3-5 sentences of performance-based narrative. These comments are very important to the student's residency application and will be quoted verbatim in the student's Dean's Letter/MSPE.)

Constructive Comments: