

THIS FORM IS FOR PREVIEW PURPOSES ONLY AND WILL NOT BE ACCEPTED FOR SUBMISSION.

PLEASE INITIATE FORM IN DOCUSIGN

FORM BBS16: ADVISOR RESELECTION ROTATION AGREEMENT

It is the student's responsibility to ensure that this form is completed by all parties.

Overview

The Advisor Reselection Rotation is a graded, credited course that requires commitment from both student and faculty. Faculty must submit an evaluation of the students' performance (via OASIS) and discuss the evaluation with the student.

For each rotation, the student must provide the Advisor with a written report or an oral presentation of the rotation research. The selection of written or oral presentation, and the specifications for each, are at the discretion of the Rotation Advisor.

Training

Students engaged in research involving vertebrate animals must complete [IACUC training](https://umassmed.sharepoint.com/sites/umms-iacuc/SitePages/Occupational-Health-and-Training.aspx) (https://umassmed.sharepoint.com/sites/umms-iacuc/SitePages/Occupational-Health-and-Training.aspx) hosted by the Office of Research.

Student engaged in research involving human subjects, must complete [CITI training](https://www.umassmed.edu/ccts/irb/CITI-GCP/) (https://www.umassmed.edu/ccts/irb/CITI-GCP/) hosted by the Office of Research.

Rotation Information

Student:

Rotation Advisor:

Academic Year: 20__ - 20__

Start Date:

End Date:

Signatures

I have read, understand, and agree with all information presented in this document.

Role	Name	Signature	Date
Student			
Rotation Advisor			