Prior to starting your rotation the student must obtain signatures from both the Professor in whose laboratory they will be rotating as well as the member of the advisory committee from the host institution. Students rotating at Molecular Biology, Princeton University must bring a copy of this form and meet with the Manager of Student Services, Room 119 Lewis Thomas Lab, to arrange for building access, PU ID and parking. The completed form is to be submitted to Perry Dominguez in Room R-102, RWJMS Piscataway. If there are any questions contact Dr. James Millonig, Program Director (CABM building, room 238, millonig@cabm.rutgers.edu). Once student rotations are complete each student will rank order their laboratory choices and final selections will be facilitated by the advisory committee. Students will enter the laboratory following the end of the second year of medical school. The PhD stipend, tuition and health benefits will be the responsibility of the research mentor. If there are questions concerning the laboratory rotation feel free to contact any of the Liaisons.

Student Name: _________________________________________

Lab Rotation # ________

Dates of rotation
_______________________________________________________________________

Name and Department of the Professor in whose laboratory you will be rotating:
________________________________________________________________________

Location of Laboratory:
________________________________________________________________________

University   Campus   Room/building
__________________________________________

Laboratory Telephone #: _____________________

Approved by Professor in whose laboratory student is rotating

__________________________________________

Signature

Approved by advisory committee member for the host institution of the rotation.

__________________________________________

Signature

Student’s current residence address: _________________________________________

_____________________________________

Cell #: _____________________ Home Tel #: ________________________