

RESEARCH ROTATION FORM

Within one week of beginning your rotation, please complete and return this form to: Patti Argenzio (argenzio@pitt.edu) or Jeanne Weiss (jwa56@pitt.edu)

GENERAL INFORMATION:	
Student's Name:	Email Address:
*Faculty Member's Name:	
Lab Location (bldg & room #):	Lab Phone Number:
ROTATION DETAIL:	
This is rotation number (please circle): 1	2 3 directed study
Fall term, Aug 26 - Dec 17, 2024 Spring term, Jan 8 - Apr 30, 2025 Summer term, May 7 - Aug 12, 2025 Note: It is important that students	complete rotations by the stated date for each period. of the rotation to prepare a written report of their experience.
SIGNATURES:	
Student:	
"I am willing to provide support to this student agree on my selection as thesis mentor."	t, at current stipend levels, as of September 2025 if we mutually
Faculty Member:	
*You must receive prior approval from a CNU a member of the CNUP Training Faculty.	P Graduate Program Co-Director if your research mentor is not
Graduate Program Co-Director:	
cc. Student Evaluation Committee	AY 2024/25