

## Laboratory Rotation Agreement Cleveland State University-Cleveland Clinic Joint Ph.D. Program in Clinical-Bioanalytical Chemistry Department of Chemistry

Only students who have been accepted into the Chemistry doctoral program are eligible to participate in rotations. It is mandatory that all first year doctoral students to-perform two (2) laboratory rotations, unless the Department of Chemistry has been officially notified by a student via submission of "Advisor Notification Form" that a Research Advisor has been chosen by mutual agreement between a faculty and the student. Both of the Rotation Sessions may be performed at the Cleveland Clinic, both may be performed at Cleveland State University, or one may be performed at each institution. The rotation schedule is set up as a full-time 6 week session or its equivalent.

Students should interview prospective researchers. Qualified researchers are those individuals having appropriate faculty appointments at Cleveland State University. You must select from a list of qualified faculty obtained from the secretary of the Department of Chemistry. This list is updated on an annual basis, according to researchers that can take on a doctoral student.

Once the student and a faculty have agreed to a Rotation Session, the faculty should sign this Laboratory Rotation Agreement Form. After obtaining the signature(s) of faculty members agreeing to the rotation, a signature of the Chemistry Graduate Director is required. The signed Laboratory Rotation Agreement Form should be returned to the Chemistry Department Office for placement in the student's folder, and, if applicable, to initiate contract preparation. A scanned copy of the form will be sent by the Department to the faculty member and, if the rotation is held at the Cleveland Clinic, the Cleveland Clinic joint doctoral program liaison. The Laboratory Rotation Agreement Form must be received by the Chemistry Department Office the semester *prior* to the semester of the rotation(s), according to the following deadlines:

- December 15 for Spring Semester contracts
- April 15 for Summer Semester contracts
- July 30 for Fall Semester contracts

UDENT NAME	CSU ID #	
ation Agreement for Laboratory Rotation Session 1		
tion Period: Labor eement to pay stipend for 6 week rotation Yes	ratory Rotation Location:	
alty Name (printed): Tel #:	Email:	
ulty Signature/Date		
ation Agreement for Laboratory Rotation Session 2		
tion Period: Labor element to pay stipend for 6 week rotation Yes	ratory Rotation Location:	
alty Name (printed): Tel #:	Email:	
ulty Signature/Date		
Labor element to pay stipend for 6 week rotation Yes   alty Name (printed): Tel #:	Email:	