**Speech and Hearing Bioscience and Technology**

**Division of Medical Sciences**

**Rotation Advisor Report Form**

Please provide an overview of the student’s work during their rotation with you. Please feel free to include any confidential feedback you may have. Please submit to:

Bertrand Delgutte [Bertrand\_Delgutte@MEEI.HARVARD.EDU](mailto:Bertrand_Delgutte@MEEI.HARVARD.EDU)

Gwen Geleoc [gwenaelle.geleoc@childrens.harvard.edu](mailto:gwenaelle.geleoc@childrens.harvard.edu)

SHBT Program: [SHBT\_Program@hms.harvard.edu](mailto:SHBT_Program@hms.harvard.edu)

Student’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Rotation Supervisor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Rotation feedback** (*1-2 pages organized into the 4 sections below*):

**BACKGROUND**

**METHODS**

**RESULTS/ACCOMPLISHMENTS**

**CONCLUSION and FUTURE DIRECTIONS**