



UC Berkeley - UCSF Graduate Program in Bioengineering
Research Rotation Authorization 2021-2022

Student Name: _____

Rotation Mentor: _____

Please submit to your home campus administrator BEFORE the rotation begins:
(check one)

_____ 1st rotation
(09/20-11/12)

_____ 2nd rotation
(01/4-02/25)

_____ 3rd rotation
(03/07-04/29)

Research Project Title:
Describe the research topic and overall objective. Be as specific as possible.

Approval Signatures:

Rotation Mentor _____

Date: _____

Student _____

Date: _____

Graduate/ 1st year Faculty Advisor _____
(Required for exceptional authorizations only)

Date: _____