Master of Science Translational Neuroscience

Report-sheet

Name of Student:
Matriculation Number:

Title describing the main content of the module: **Advanced lab rotation 2**

**10 ECTS / course number 0359190**

Institution where the module took place:

Course duration: From (Day/Month/Year) to (Day/Month/Year)

Name of supervisor:

Form of Examination*: written examination/talk

Appraisal of achievements**: ________________________________

Grade***:

Date                Signature of supervisor

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* Please describe how the achievements of the student were evaluated, options are: written examination, written protocol; ** Please describe concisely which research questions the student worked on, which methods were employed and which qualitative outcome was achieved; ***Scale: 1 (very good), 2 (good), 3 (satisfactory), 4 (sufficient), 5 (insufficient); intermediate grades (x,3 or x,7) are permitted.