

**University of Maryland Exchange Visitor Program
 Mid-point Evaluation**

NAME OF TRAINEE		
TRAINEE	SIGNATURE	DATE
FACULTY SUPERVISOR	SIGNATURE	DATE (MM/DD/YY)

How well do you feel the trainee is accomplishing the overall goals for the training program at this point in his/her training? (rating scale excellent= 5, poor= 1, circle the number that describes how you feel)

1. An understanding of the process for conducting research as outlined in his/her training program	5	4	3	2	1
2. An understanding of the safety and ethical issues in conducting research	5	4	3	2	1
3. Practical experience in conducting research	5	4	3	2	1
4. Experience in the work environment of an academic research institution in the U.S.	5	4	3	2	1
5. How well is the trainee acquiring the knowledge required for his/her training program?	Very well	Adequately	Inadequately		
6. How well is the trainee developing the skills required for his/her training program?	Very well	Adequately	Inadequately		
7. How dependable is the trainee in accomplishing tasks, being on time for work, etc.?	Excellent	Good	Fair	Poor	
8. How is the trainee's attitude toward his/her work?	Excellent	Good	Fair	Poor	
9. How is the trainee's English proficiency? (if applicable)	Excellent	Good	Fair	Poor	

COMMENTS: