

RENEWAL OF IONIZING RADIATION AUTHORIZATION FOR ACADEMIC INSTRUCTION

Date:
Department:

Authorization Number:
Authorization Permit Holder:

Please print or type the information requested below. Return to Radiation Safety , EH&S when completed and signed.

Applicant	Department	Course No.	Quarter

Full legal names (last, first, middle) of additional individual(s) supervising use of ionizing radiation in this course, Designate if Employee (E), Postdoc (P), Graduate Student (G), Undergraduate Student (U). Attach or ensure that training and experience forms are submitted to EH&S for supervising individuals:

After first meeting: supply a list of students involved in the laboratory where ionizing radiation is used and ensure that radiation safety orientation/instruction has been provided to these students. Indicate on this student list the date of radiation safety instruction and a list of topics covered. If assistance is desired in providing radiation safety instruction, contact EH&S, Radiation Safety.

Indicate building and room(s) where ionizing radiation will be used for this course:

Describe any changes which may have occurred from previous authorizations regarding the use of ionizing radiation in this course (e.g., different sources/machines, experimental procedures, etc.):

We certify that the use of ionizing radiation will be as described in the original application for this course, as modified by any changes described above or in previous amendments. We will provide a list of students involved in the class and will ensure that these students have received radiation safety instruction prior to using ionizing radiation.

Applicant's Signature/Date

Department Chair's Signature/Date
