**Application for the Use of Radioactive Materials**

|  |
| --- |
| 1. Applicant Information (“Authorized User”)
 |
| Name | Department | G-Number | Date of Birth |
|  |  |  |  |
| Office Location | Telephone | E-mail Address |
|  |  |  |
| Application Type (check one): | Initial |  | Renewal |  | Modification |  |
| 1. Radioactive Material Types and Quantities
 |
| Isotope | Max. Quantity On-Hand | Chemical Form | Annual Usage |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| 1. Time Period/Radiation Workers
 |
| Beginning: |  | Ending: |  | Additional Staff (yes/no): |  | (If yes, complete the section below) |
| Name | G Number | Date of Birth | Email address |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| 1. Project Description and Health and Safety Considerations
 |
| On a separate sheet provide the following information about the project with a Curriculum Vita:* Description of proposed use and research objectives
* Health and safety hazards associated with exposure
* Description of procedures to maintain use/storage exposure to radiation ALARA
* Personal protection requirements – dosimetry, protective equipment, etc.
* Waste streams and disposal procedures
* Exposure and spill response procedures
* Employee training and hazard communication procedures
* General lab rules beyond those in the Chemical, Biosafety, and Radiation Manuals
 |
| 1. Space & Equipment Requirements
 |
| Isotope(s) | Building, Room Number | Monitoring & Safety Equipment(survey meters, probes, scintillation, hoods, etc.) |
|  |  |
|  |  |  |
|  |  |
| Applicant Signature: |  | Date: |  |
| RSC Approval Date: |  | Approval Expiration Date: |  |