

PROJECT APPROVAL FORM

1. Name of Principal User* _____

*A user registration form must be on file for the above-named individual.

2. Position with University _____

3. Department _____ Ext. _____ Office _____

4. Title of Project _____

5. Project location(s) _____

6. Description of project, including methods and equipment to be used, what chemicals are required, what kind of waste is generated, what personnel are involved, etc.

7. Type, form and quantity of radioactive material(s) to be utilized.

8. What radiation safety problems would most likely be encountered in this project?

9. How is the radioisotope(s) to be stored and ultimately disposed of?

10. Is survey instrumentation available and what type is it?

11. Additional Comments:

12. Statement: I hereby apply for approval of the project involving the use of radioactive materials as described above. I agree to adhere to any conditions of approval as set forth by the Radiation Safety Committee and I further agree to inform the Committee of any proposed changes in the project conditions as stated above, in advance of any such changes being made.

Signature _____
(written)

Name _____
(typed)

Date _____

Radiation Safety Committee Evaluation

Approve Project _____ Disapprove _____

Reason(s) for disapproval:

Signed _____
(for the committee)

Date _____