

UNIVERSITY OF HOUSTON

Radiation Badge Request and Exposure History

Each employee must complete and return this form to Radiation Safety (EPSD-1852) and must be issued a radiation badge before working with radiation. Each employee must read and understand the attached "Personnel Monitoring Guidelines" regarding proper use of the radiation badge.

FULL NAME:(Last, First, M.I.)_____ Sex (M/F)_____

List any other name under which you have been employed and/or monitored:_____

Date of Birth:_____ Social Security #:_____

Department:_____ Office Phone #:_____

I will work with x-ray equipment:_____ Yes _____ No
(X-ray diffraction, fluorescence, and analytical operators may require a ring badge for their dominant hand)

I will work with 3H, 14C, and/or 35S ONLY:_____ Yes _____ No

TYPE OF RADIATION BADGE NEEDED: (check applicable)

_____ K1-Whole body _____ U Series (Ring) _____ Other _____

EXPOSURE HISTORY

A. Have you ever worn a radiation badge before?_____ Yes _____ No

B. Ever monitored at University of Houston?_____ Yes _____ No

If your answer to A is "YES", provide the following information for the most recent exposure history:

EMPLOYER:_____

DEPARTMENT:_____

ADDRESS:_____

EXPOSURE PERIOD FROM:_____ TO _____

If your answer to B is "YES", provide the following information:

PREVIOUS EXPOSURE HISTORY AT THE UNIVERSITY OF HOUSTON

DEPARTMENT: _____

EXPOSURE PERIOD FROM: _____ TO _____

I HAVE READ AND UNDERSTAND THE ATTACHED "PERSONNEL MONITORING GUIDELINES" REGARDING THE PROPER USE OF THE RADIATION BADGE. I AUTHORIZE RELEASE OF MY RADIATION HISTORY.

SIGNATURE: _____ DATE: _____