

## Personal Dosimeter Request

### SECTION I – Applicant Personal Information

Last Name:	First Name:	MI
Title/Position:		Date of Birth:
Mainstreet ID (Peoplesoft) #:		Social Security Number:
Department:		
Work Address (e.g., Lab Address):		Permanent Address:
Work Phone:		Personal Phone:

### SECTION III –Monitoring Needed

<input type="checkbox"/>	Using high energy radioisotopes (list below).
<input type="checkbox"/>	Using neutron sources (thermal, intermediate and fast).

<input type="checkbox"/>	Using gamma, X-ray or X-ray producing equipment. (describe below)
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**Table 1**

Nuclide	Quantity/Activity	Chemical Form
Procedures: (Including how much Isotope per experiment and time used during a typical experiment/week)		
Protection Measures:		

**Table 2**

Equipment Type/Description	Location

### SECTION III – Previous Occupational Exposure and Training

Describe your previous experience and training in the use of radioisotopes. List (Course Description/Responsibilities) isotopes and amounts used, duration of the training (Dates), and whether the training was a formal course or on-the-job. Also, include any specific training in Radiation Protection, Monitoring Methods, Measurement/Calculations, and Biological Effects of Radiation.

Date(s)	Course Description and Responsibilities

### SECTION IV – Certification

**I have read and understand the information contained in the UMaine Radiation Safety Program relating to External Monitoring and Medical Monitoring. I agree to use all practicable methods to minimize exposures to As Low as Reasonably Achievable and to abide by the monitoring program requirements.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

#### Privacy Act Notice

Pursuant to the Federal Privacy Act of 1974, you are hereby notified regarding the request of your social security number and other identifying information. Compliance with this request is voluntary. However, compliance with U.S. Nuclear Regulatory Commission regulations (10 CFR Part 20) requires the use of an applicant's social security number for tracking occupational users of radiation and individual monitoring of radiation exposure. The use of licensee-generated identification numbers should be avoided whenever possible. The social security number is used to verify your identity and all or part of the information collected may be disclosed to the U.S. and State governmental agencies having jurisdiction over the occupational use of radiation.

Accordingly, the effect of failure to provide all of the requested information may be the inability to issue a badge and/or dosimeter.

Section 6.7 of the UMaine Radiation Safety Program details the provisions for monitoring staff, students and visitors in order to monitor and record external occupational exposure to radiation as required in State of Maine Rules Relating to Radiation Protection (SMRRRP), D.18

Area monitoring only, is required for all interlocked, closed-beam analytical x-ray instruments (radioactive material source or equipment producing).

Monitoring is not generally provided for persons working in laboratories in which only alpha emitters or low energy beta emitters (< 250 keV) are used.

Individuals working solely with Cr-51, S-35, P-33, C-14, or H-3 are not required to wear external monitors