

# Request for Radiation Use Authorization

**Principal Investigator \*(P.I.):** (Provide statement of training & experience)

\_\_\_\_\_  
Name

\_\_\_\_\_  
Department

\_\_\_\_\_  
Office Location/Phone

**Principal User or Lab Supervisor:** \_\_\_\_\_

(If different than P.I.)

**Name of each person using radioactive material or radiation producing machines:**

\_\_\_\_\_

**Location(s) where radioactive material will be used or stored:** \_\_\_\_\_

Radioisotope    Chem. Form    Phys. Form    mCi/Order    mCi/Experiment    Max. Amount in Lab (mCi)

*NOTE: Information listed for radioisotope usage will be used as criteria for authorized limits.*

**Information Required for Intended use of Radiation Producing Machines:**

Location

Make/Model

Type (xrd, xrf, Etc.)

KVp (max. rated)

**List:** Type, make, and model of radiation detectors to be used, if applicable.

**Briefly describe:**

1. Intended use for radioisotopes or radiation producing machines:  
(For machines, indicate anticipated KvP and mAs in addition to project description)
2. Anticipated radioactive waste products:  
(e.g. animals, biohazards, solvents)
3. Methods to prevent contamination and/or keep personnel exposure as low as reasonably achievable (ALARA):

Principal Investigator Signature: \_\_\_\_\_

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

\*Principal Investigator means person with overall responsibility for the project, including radiation safety.