



**RADIATION DOSIMETER ASSIGNMENT FORM**

Application Date: \_\_\_\_\_ Panther ID: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Last First M.I.

Type of Dosimeter Required:  K-Body Badge  U-Ring Dosimeter (Ring Size: \_\_\_\_\_)

Laboratory Location: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_  
Building Room #

Home Address: \_\_\_\_\_  
Street Address City State Zip Code

Are you the Principal Investigator?  Yes (If No, P.I.'s Name \_\_\_\_\_)  
Last First

Have you used radioactive materials before?  Yes  No

If Yes, Please attach copy of previous occupational exposure record or initial here if exposures were minimal\*  
 \_\_\_\_\_ (\*annual occupational exposure levels less than those specified in F.A.C. 64E-5.304)

Are you currently using or have exposures to radioactive materials in non-University related activities?  
 Yes  No

Are you a visiting Authorized User?  Yes  No

If yes, how long do you expect to be using radioactive materials/radiation producing devices here at FIU? \_\_\_\_\_

**Please read the following and sign-off on the bottom line:**

**Monitoring**

- All dosimeters must be returned to the Radiation Safety Office (Environmental Health & Safety Department) on the quarterly schedule described overleaf.
- Failure to return dosimeter holders, when they are no longer required, will incur a cost charged to your department.

**Declared Pregnancy**

- Florida Administrative Code 64E-5.311 requires implementation of necessary procedures to control occupational exposure of a **declared pregnant** woman.
- It is your individual responsibility to make such written declarations to the Radiation Safety Office, CSC 162.

**Training**

- It is your responsibility to receive and read the FIU Radiation Protection Manual

**Termination**

- Florida Administrative Code 64E-5.339 requires that at the time you terminate study/employment with the University, the RSO provide you with a written report summarizing exposures you may have received during the course of your study/work with radioactive materials at FIU. This report shall be provided within 30 days of the RSO's receipt of notification regarding your student/employment status.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal Investigator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_