

The University of North Carolina at Greensboro

Application for Authorization to Obtain and Use Radioactive Materials

1. Applicant's Name: _____ Application Date: _____

2. Department: _____ Office Location: _____

3. Office Phone: _____ Lab Phone: _____

1. Lab Location and Room Numbers: _____

2. Project(s) Title: _____

6. Radiological Data:

Radionuclides Requested and Maximum Quantities:

<u>Radionuclide</u>	<u>Chemical Form</u>	<u>Activity (mCi)</u>
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1. _____

2. _____

3. _____

4. _____

7. Description: Provide a brief description of the experiment(s) and outline purpose or objectives.

8. Use and Storage Areas: Specify where radioactive materials will be used and stored. Describe security measures and protective equipment available (bench shields, lead shield, hood use, etc.)

9. Handling Procedures: Describe Procedures to be used to minimize personnel exposure and lab contamination.

10. Radiation Surveys: Describe instruments available to be used for monitoring lab areas, equipment, and personnel during experiments. Describe methods and frequency of monitoring for contamination of these areas.

11. Training and Experience of Applicant: Describe training and experience relating to use of radioactive materials in research, specifying radionuclides and quantities handled. Describe radiation safety training, including location and dates of training. Specify location and dates of work experience. Attach training certificates if available.