

**Instructions:** Two copies of this form will automatically print; submit one to the Radiation Safety Officer and the other should be retained for your record. If you have had previous occupational exposure at another institution, please call the Safety Officer to arrange for obtaining your Radiation Exposure history (701-231-7759).

Send completed forms to: Radiation Safety Officer, NDSU Dept 3300, PO Box 6050, Fargo, ND 58108 or by Campus Mail to Radiation Safety Officer, Safety Office.

New Order     Change in Service

Name of person requesting service: \_\_\_\_\_  Female     Male

Dept: \_\_\_\_\_ Building: \_\_\_\_\_ Room: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Empl ID/Student ID: \_\_\_\_\_

Is there any previous occupational exposure history?  Yes     No

Type of exposure:(nuclide used or energy of radiation) \_\_\_\_\_

Choose 1 type:  Badge     Ring    If "Ring" selected, choose size:  Small     Medium     Large

Remarks: \_\_\_\_\_

Direct Supervisor Name: \_\_\_\_\_

Project Director Name: \_\_\_\_\_

Project Director Authorization Signature

Date

### **IMPORTANT - PLEASE NOTE**

**Agreement for Service:** The user is responsible to notify the Radiation Safety Office when he/she terminates work with radiation or radioactive materials to avoid unnecessary expense to the University.

**Assignment of Exposures:** Only the person to whom it is assigned may use a badge. Exposures will be charged to the individual whose name appears on the badge.

**Badge Exchange:** All badges will be exchanged monthly. They will normally be distributed by campus mail except where other arrangements have been made.

**User must return his/her expired badge promptly to the Radiation Safety Office.**

For Department Use Only

Date Started: \_\_\_\_\_ Date Stopped: \_\_\_\_\_

Assigned Badge #: \_\_\_\_\_ Type: \_\_\_\_\_ By: \_\_\_\_\_

#### **Route this form to:**

University Police & Safety Office  
Dept 3300, PO Box 6050  
Fargo ND 58108-6050

Phone (701) 231-7759  
Fax (701) 231-6739