



Radiation Safety
 100 Oak Creek Building, Corvallis, Oregon 97331-7404
 T 541-737-2227 | F 541-737-9090 | <http://oregonstate.edu/ehs/rso>

Instructions: Send completed form to Radiation Safety, 100 Oak Creek Building, for approval.

PROVISIONAL USE AGREEMENT FOR NEW RADIATION WORKER

Please add (name) _____ to my Radiation Use Authorization as of (date) _____. I will ensure: that this individual has read the Training for Unsealed Isotope Users online material before beginning work with radioisotopes; that this individual will attend a radiation safety orientation seminar within two months; and that this individual will not work with radioisotopes before attending the seminar except when an approved - radiation worker listed on my RUA is present and has agreed to oversee the radiation safety aspects of the individual's activities. I will request dosimetry for the user if required by the RUA conditions.

The written training material is located on the web at:

<http://ehs.oregonstate.edu/rso/training>

 Program Director (printed)

 Signature (Program Director or Lab Contact)

 Department

I have read the Isotope Orientation for New Users reading material. I will attend a Radiation Safety Orientation class within two months. I will not work with radioisotopes before attending the class except when there is an approved radiation worker present who has agreed to oversee the radiation safety aspects of my activities.

 Signature

 Date

 Printed Name

 email address

 OSU Identification Number

 *** For Radiation Safety Office Use Only ***

Date received at RSO _____ Date entered in EHSA _____

Reviewed by (RSO representative) _____