Texas Tech University Health Sciences Center

Application for Short-Term/Temporary Approval for Supervised Work with Radioactive Materials

Full Name: _____ _____ _____
Last First Middle (Maiden)

_____ _____ _____
Title Department Sublicensee

_____ _____ _____
Laboratory Room Numbers Laboratory Telephone Number Location (Campus)

Proposed Dates of Work (Period of Approval): _____

Isotopes to be used: _____

Description of Utilization/Work to be done: _____

_____

_____

Applicant Statement: I understand that this approval is temporary, and is given only for the period specified and for the activities listed or described above. I understand the hazards associated with the use of radioactive materials and agree to follow prescribed rules, regulations, and safe work practices. I understand that all work must be performed under the supervision and direction of, and in the manner prescribed by the sublicensee.

_____ _____
Applicant Signature Date

Sublicensee Statement: I am familiar with the proposed studies and techniques listed or described above, and agree to allow these studies and techniques to be performed in my radiation laboratory areas. I accept responsibility for instructing the applicant in the proper techniques and procedures to be used and for supervision of the handling and use of radioactive materials used in the above listed or described activities.

_____ _____
Sublicensee Signature Date

Application Approved: ☐ Yes ☐ No

_____ _____
Radiation Safety Officer Signature Date

Approval Period: From _____ To _____

Special Conditions of Approval: _____

_____

_____

Texas State Government Privacy Policies (Government Code):
1) With few exceptions, you are entitled on request to be informed about the information the state governmental body collects about you; 2) Under Section 552.021 and 552.023, you are entitled to receive and review the information; and 3) Under Section 552.004, you are entitled to have the state governmental body correct information about you that is incorrect.