



uOttawa

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Canada's university

UNIVERSITY OF OTTAWA

Office of Risk Management

**APPLICATION FOR AUTHORIZATION TO ACCESS LABORATORIES
CONTAINING RADIOACTIVE MATERIAL (For Non-Radioactive Users)**

Name		Student Number	
Department		Employee Number	
Telephone #		Permit Holder	
Email		Supervisor	
Graduation Date			

Position

<input type="checkbox"/>	Under-Graduate Student	<input type="checkbox"/>	Graduate Student	<input type="checkbox"/>	Post-Doctorate
<input type="checkbox"/>	Technician	<input type="checkbox"/>	Visitor	<input type="checkbox"/>	Volunteer
<input type="checkbox"/>	Other:				

Access Location Required.

Building: _____

Room: _____

Research Activities

Course Code: _____

Research Project: _____

Training

Have you attended the University of Ottawa Radiation Awareness Session? No Yes

Date: _____

Conditions

Reporting requirements:

(1) **Every licensee who becomes aware of any of the following situations shall immediately call Office of Risk management:**

- (a) no eat or Drink in the laboratory
- (b) no access authorized of anyone not on 1) permit, and 2) Authorized individual.
- (c) a release, not authorized by the ORM, of a quantity of radioactive nuclear substance into the environment;
- (d) no mixing waste. Do not put any non radioactive waste into a radioactive bucket.
- (e) an attempted or actual breach of security or an attempted or actual act of sabotage at the site of the licensed activity;
- (f) information that reveals the incipient failure, abnormal degradation or weakening of any component or system at the site of the licensed activity, the failure of which could have a serious adverse effect on the environment or constitutes or is likely to constitute or contribute to a serious risk to the health and safety of persons or the maintenance of security;**
- (g) an actual, threatened or planned work disruption by workers;
- (h) a serious illness or injury incurred or possibly incurred as a result of the licensed activity;
- (i) do not touch or handle any radioactive material

(2) **Every licensee who becomes aware of a situation referred shall file a full report of the situation, and report to ORM and the report shall contain the following information:**

- (a) the date, time and location of becoming aware of the situation;**
- (b) a description of the situation and the circumstances;**
- (c) the probable cause of the situation;**

Signature

Authorized Lab Personnel Application (Non-users)

I have read and understand the above General Conditions:

Name: _____ Signature: _____

Supervisor: _____ Signature: _____

Permit Holder: _____ Signature: _____