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

<table>
<thead>
<tr>
<th>Under-Graduate Student</th>
<th>Graduate Student</th>
<th>Post-Doctorate</th>
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<tbody>
<tr>
<td>Technician</td>
<td>Visitor</td>
<td>Volunteer</td>
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<tr>
<td>Other:</td>
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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)

<table>
<thead>
<tr>
<th>I have read and understand the above General Conditions:</th>
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<tbody>
<tr>
<td>Name: ________________________ Signature: ______________</td>
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<tr>
<td>Supervisor: __________________ Signature: ______________</td>
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<td>Permit Holder: __________________ Signature: ______________</td>
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