



Dartmouth College HANOVER • NEW HAMPSHIRE • 03755

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ENVIRONMENTAL HEALTH AND SAFETY

FILM BADGE REQUEST FORM

For Administrative Purposes (rev: Oct-97)

ACCT:
SERIES:
PARTICIPANT #:
BADGE TYPE:
Called Landauer:
First Monitor Issued:

Name: _____
(last) (first) (initial)

Employee Status: Regular Undergraduate Graduate Other _____
(circle one)

Social Security #: _____ 4. Sex: _____ 5. Birthdate: _____

Department: _____

Principal Investigator: _____

Please list isotopes and amounts per experiment you will be working with:

- 1. _____ 2. _____
- 3. _____ 4. _____

List previous institutions and **mailing addresses** where the employee was issued a film badge for radiation monitoring:

- 1. _____ Dates there: _____

- 2. _____ Dates there: _____

I hereby give my consent for the release of information concerning previous radiation exposure to myself and to allow that information to be forwarded to Dartmouth College for use in maintaining up-to-date records concerning my total radiation exposure.

Signature: _____ Date: _____