

APPENDIX D – RADIATION WORK PERMIT

INSTRUCTIONS:

RSO Use Only
RWP No.:_____

This form is to be completed by the AU and approved by the RSO and RSC prior to any work performed with radioactive materials. The AU should submit the completed form to the RSO via Campus Mail addressed to Environmental Health & Safety, 1716 Park Street.

List all the isotopes and physical forms for which the permit is being sought (use supplemental sheets if necessary). If your permit is for a sealed source, please contact the vendor to obtain a copy of the Sealed Source and Device Registry certificate and attach it to this RWP.

	Maximum activity that you are requesting to be in		Source Shall Be		
Isotope*	your possession at any one time, including waste and stores	e, including waste and		Open	Part of Device

This application is (please check all that apply):

An initial application for this isotope

A request for a change of approved location for an existing RWP

A request for an increase of an isotope approved in an existing RWP

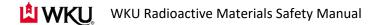
A request to add an AU to an existing RWP

A request to change the contact information for the primary AU in an existing RWP

A request to use radioactive material away from WKU under the condition of reciprocity Other:

Please answer the following questions (use another sheet of paper, if additional space is required).

- 1. Explain briefly the intended use of the radioactive materials/equipment.
- 2. List the building(s) and room(s) where the isotope(s) will be stored and/or used. Attach a scale floor plan showing these locations and the adjacent non-radiation use areas.

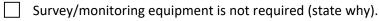


- 3. Is (are) this (these) location(s) currently an approved radioactive materials use/storage area? Yes No If yes, explain.
- 4. List the RWP No. for any other approved Radiation Work Permit you have been issued.
- 5. Describe the experiment in general terms. Indicate typical activities of radioactive materials to be used, and duration/frequency of use. Describe physical/chemical manipulations or activations intended, if applicable. If any activation products will result from the use of the indicated radioactive material, provide detailed information.
- 6. Will this material be used by persons other than you? Yes No If yes, provide information to identify these persons, their qualifications, and indicate how you intend to ensure that they receive adequate supervision.
- 7. Are you familiar with the provisions and regulations of the following:

Standards for Protection Against Radiation, 902 KAR 100:019?	Yes
WKU Radioactive Material License?	Yes
WKU Radioactive Materials Safety Manual	Yes

8.	If there is (or shall be) possession of survey and monitoring equipment, complete the Survey and
	Monitoring Equipment Form in Item 20. Itemize specific items owned and/or those which you
	plan to obtain if this application is approved.

There is (or shall be) survey/monitoring equipment. A Survey and Monitoring Equipment Form is completed in Item 20. Include any additional information that is important regarding survey/monitoring equipment.



- 9. Outline the specific plans for the transportation, order, receipt, use, and storage of radioactive material(s). Specify the records that will be kept.
- 10. Outline the specific plans for storage and disposal of radioactive waste (if any). Specify the records that will be kept.
- 11. Describe arrangements that have been made with the Radiation Safety Officer with respect to personnel monitoring requirements.

There is (or shall be) personnel monitoring. A Dosimetry Form is completed in Item 21. Include any additional information that is important regarding personnel monitoring.

]No]No]No

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Personnel monitoring is not needed (state why).

- 12. Outline the plans for the orientation of assistants, staff, students, or visitors with respect to radiological safety in general.
- 13. Describe any storage facility(ies) for the radioactive material(s) and outline plans to secure isotope(s) and contaminated waste from use or possession by unauthorized personnel, or to prevent accidental loss.
- 14. What facilities and protective equipment are available? (Hoods, absorbent paper, labels, tags, shielding, etc.)
- 15. Describe the precautions that will be taken to test for leakage and/or contamination upon receipt of these materials.
- 16. What measures will be taken to prevent, detect, and handle a "spill" or "leak"?
- 17. (For existing AUs only) Provide any information on training or experience not listed on your AU application that is relevant to this RWP.
- 18. Please provide any other information that might be helpful to the Radiation Safety Officer and the Radiation Safety Committee.
- 19. Radioactive Materials Information Form

Isotope	Activity	Identifying Information		Half-Life	Radiation Types	lsotope On WKU	*Copy of SSDR
isotope		Manufacturer	Model	Hall-Life		(α, β, γ, x, n)	License?

*Note: If your application is for a sealed source, obtain a copy of the Sealed Source and Device Registry certificate from the vendor for the item you are purchasing and attach it to this application.

20. Survey and Monitoring Form

Radiation Survey Meter(s)					
Manufacturer	Meter Model No.	Probe Model No.	Radiation(s) Detected		

21. Dosimetry Form

Personal Dosimetry						
Dosimetry	Dosimeter	Radiation(s)	Exchange			
Vendor	Туре	Detected	Frequency			

Check here if personal dosimetry is not required

Visitor/Observer Dosimetry				
Manufacturer Model Radiation(s) Detected				

Check here if visitor/observer dosimetry is not required

RADIATION WORK PERMIT CERTIFICATION AND APPROVAL

I certify that the work performed with the materials requested in this application will be done in accordance with the rules and regulations contained in 902 KAR 100, WKU's Radioactive Material License, and the WKU Radioactive Material Safety Manual.

Applicant's Signature: _		Date:	
Approved by:		Date:	
-	(Radiation Safety Officer)		
Approved by:		Date:	
	(Radiation Safety Committee Chair)		