

NUCLEAR MEDICINE DOSIMETER REQUEST

Old Dominion University
Environmental Health and Safety/Radiation Safety Office
1070 West 47th Street
Norfolk, VA 23508
(757) 683-4495

ICN monitoring devices are property of Old Dominion University. Charges will apply as follows for lost or stolen monitoring devices not turned in within one month following the end of monitoring period.

<i>Ring Monitors</i>	<i>\$8.00</i>
<i>Monthly Film Holders</i>	<i>\$5.00</i>

Name (Please Print): _____

Former Name(s): _____

Social Security No.: _____ Date of Birth: _____

Permanent Address Information: _____
(Street Address)

_____ (City, State, Zip Code)

_____ (Telephone – include area code)

Name of Principal Investigator: _____

Department: _____ Building/Room: _____

Source(s) of Potential Radiation Exposure: _____

Have you ever been:

a. Issued a dosimeter at ODU? Yes _____ No _____

b. Occupationally exposed to ionizing radiation? Yes _____ No _____

If the answer to 7(b) was "yes", please give the *Name, Address, and Telephone* of the previous employer, and the *Dates of Employment*.

Employer Address: _____
(Employer Name)

_____ (Street Address)

_____ (City, State, Zip Code)

Employer Telephone: _____
(include area code)

Dates of Employment: _____ to _____

I hereby authorize my former employer to release my past exposure history to Old Dominion University.

Signature: _____ Date: _____