

UNIVERSITY OF HOUSTON
Radiation Safety Manual

Application for Class IIIb and IV Laser Subregistration

Principal Investigator: _____ Department: _____

Office Location: _____ Office Phone #: _____ E-Mail: _____

Emergency After Hours Contact: _____ Phone #: _____

Lasers Use Locations & Phone #s: _____

Lasers Data:

Manufacturer	Model	Serial #	Type	Class	Max Time	Max Output	Wavelength	Active Y/N

Summary of Laser procedures:

Summary of Principal Investigator's training and experience with lasers including locations, courses, laser types, and duration. Principal Investigators must attend the UH Laser Safety Short Course.

UNIVERSITY OF HOUSTON

Radiation Safety Manual

List of Authorized Users*:

* Authorized Users must have read the Laser Safety Section of the Radiation Safety Manual and must verify by signing their initials. _____

* Authorized Users must have received specific radiation safety training for the radiation hazards in their labs from their Principal Investigator and must verify by signing their initials. _____

* Authorized Users must have attended and passed the UH Laser Safety Short Course and must verify by signing their initials. _____

(Other Authorized Users may be added later by amendment after completing these requirements)

If the Principal Investigator receives interim approval by the RSO or is approved by the Radiation Safety Committee prior to taking the UH Laser Safety Short Course (LSSC), then the Principal Investigator agrees to attend and pass the next scheduled XSSC.

I certify that the information contained herein and attached hereto is true and correct to the best of my knowledge.

Signature of Principal Investigator	Date
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Signature of Radiation Safety Officer	Date
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Signature of Radiation Safety Committee Chair	Date
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