

RSF-60-1**UNM SHEA/RADIATION SAFETY DIVISION
Radiation Worker's Training & Experience***Please print*

Name _____ Dept _____ Date _____

SSN _____ - _____ - _____ DOB _____ / _____ / _____ Permit Holder _____

Technician _____ Nurse _____ M.D. _____ Ph.D. _____ Other _____

LIST PAST TRAINING AND EXPERIENCE (FOR NON-UNM TRAINING, SUBMIT APPLICABLE COURSE OUTLINE)

Type of Training	Where Trained	Duration of Training	On the Job	Formal
Principles and Practices of Radiation Protection			Y N	Y N
Radiation Measurement Standardization and Monitoring Techniques and Instruments			Y N	Y N
Mathematics and Calculations Basic to the Use and Measurement of Radiation			Y N	Y N
Biological Effects of Ionizing Radiation			Y N	Y N

EXPERIENCE WITH RADIOACTIVE MATERIALS OR RADIATION PRODUCING MACHINES / INSTRUMENTS

Radionuclide or Machine	Activity Used (μ Ci) or Machine kVp/mA	Where Experience was Gained	Duration of Experience	Type of Use

Briefly describe your job responsibilities / activities: _____

This is to certify that
I am a:
(Check all that apply)UNM
UH
Carrie-TingleyFaculty
Staff
Student
Employee
Volunteer_____
E-mail address_____
Signature

