

**WILLIAMS COLLEGE**

**RENEWAL APPLICATION FOR USE OF RADIOACTIVE ISOTOPES**

**I. Personal Data**

Name \_\_\_\_\_

Department \_\_\_\_\_

Room Number \_\_\_\_\_ Phone \_\_\_\_\_

**II. Use of Radioactive Material**

Date of original authorization \_\_\_\_\_

Date of most recent re-authorization \_\_\_\_\_

Since the date of most recent re-authorization,

has there been any change in the type or amount of radionuclides used? \_\_\_\_\_

has there been any significant change in experimental procedures that might affect personnel safety? \_\_\_\_\_

(If the answer to either of the above is "Yes", please explain below)

**III. Explanation of Changes**

Signature\_\_\_\_\_

Date\_\_\_\_\_

Approved by the Radiation Safety Committee\_\_\_\_\_

Date\_\_\_\_\_