

Radiation work at JYFL Accelerator Laboratory			
A	Last name (surname):		
	First name:		
	Sex:	Birthday (DD.MM.YY):	(ID: )
	Title:	Nationality:	
	Home institute and address:		
	E-mail address:		
B	Current status at home institute:      Staff member      Student		
	Category A radiation worker,      Category B (temporary) radiation worker		
	Attached documents:      Monitoring document (EC countries),      Health control,      Personnel dose		
C	Radiation work at JYFL (use following numbers for working categories):		
	(1) Experiments with accelerator beams      (2) Radionuclides (unsealed sources)		
	(3) Sealed sources      (4) Accelerator technology      (5) Other		
	Time period at JYFL DD.MM.YY - DD.MM.YY	JYFL local research group/person with whom you are working:	Work category (numbers above)
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	-		
D	Radiation dose measurement:		
	You will bring <b>your own</b> personal radiation badge:      yes / no		
	You will need the personal radiation badge from JYFL:      no / yes      (only one badge in use!)		
	Mailing address for the registered doses by JYFL (if not the address above):		
E	Remarks:		
INFO	Information on personnel dose record is mailed if dose exceeds threshold value for registration. Mark dates: DD.MM.YY (DD = day, MM = month, YY = year) (ID number means Finnish social security number.) If there are changes in parts A, B or D, fill in a new form (earlier forms available from safety officer). Form shall be returned to radiation safety officer without delay.		