

Environmental Health & Safety Department

Radioactive Materials Permit Amendment Form

		Se	ction 1: Permit Holder	Information			
Permit Holder/PI:			College:		Department:		
Authorization/Permit Number:					Phone:		
Email:			Date:		Date:	te:	
		Secti	on 2: Addition of Perso	nnel to Permit			
Name		Job Title		Years of Radia	tion Experience	Completed KSU Radiation Safety Training?	
						Yes No	
						Yes No	
		Section	n 3: Removal of Person	nel from Permi	t		
Name		Reason for Removal				Removal Date	
		Section 4: 0	Change in Permitted Iso	tope Activity Li	mit(s)		
Isotope	Current Isoto	pe Limit (mCi)	Requested Limit	Current Total A	Activity on Hand (St	ock + Waste)	

If you	are requesting a	n increase in	activity, please prov	ide justification below	:		
			Sec	tion 5: Addition of Is	sotope(s)		
	Radioisotope	Half-Life	Maximum	Estimated Activity	Maximum	Chemical / Physical	Estimated
			Purchased at one	Per Procedure	Activity on Hand at one	Form / Compound	Frequency of Use
			time (mCi)	(mCi)	time (mCi)		
1.							
2.							
	Dlagga da	scaribo tha r		n 5A: Explanation of		additional pages if ne	ococcami).
Radio	isotope #1	escribe the p	or occurred for which	in each isotope will b	e useu (attacii	auunuonai pages ii ne	cessary):
	-						
Radio	isotope #2						
Will ra	adioactive mater	ials be used	with animals? 🔲 Y	es No If yes, plea	se provide an ex	xplanation in the space	below.
IACUC	Protocol Numbe	er:					
22200		·					
Will re	ndigactivo mator	iale ha ucad	in combination with	biohazardous material	s? Vos 🗆	No If yes, please prov	ido an ovnlanation in
	ace below.	iais de useu	in combination with	bioliazai uous iliatei lai	is: [] 165 []	no ii yes, piease piov	iue an expianation in
IBC Pr	otocol Number:						
TA7:11	ndinactiva mater	iala ha waa d	in combination with	hazardous chemicals?	Voc No	If you places pro-3-	an avalanation in the
	adioactive mater below.	iais de used	m combination with	nazaruous cnemicais?	☐ Yes ☐ No	o If yes, please provide	an explanation in the
				2.62			
List th	e name(s) of the	hazardous c	hemical(s) (attach SI	DSJ:			

meter	film badges, etc.), if appli	cable to the specific isoto	re that he/she has access to the proper monitoring equipment (i.e., GM survey ope proposed for use. If a GM survey meter is required, the PI/researcher will need m badges are required, they will be assigned by EHS.
		Section 6: Addi	tion of Authorized Work/Storage Area(s)
	Building	Room Number	Planned Use of Space
1.			
2.			
the PI	researcher to identify des	signated use areas within	to the permit, contact EHS to schedule a walkthrough of the proposed area(s) with n the room, storage locations, and wipe test points. The request will then be addition is made to the permit.
			Section 7: Security
	,		stant surveillance and immediate control of a radiation worker or secured to uce below, describe the measures that will be taken to meet these requirements.
		Section 8: Remo	oval of Authorized Work/Storage Area(s)
	Building	Room Number	Current Use of Space
1.			
2.			
area(s is clea). EHS will conduct an exit red for relocation. Also, al	t survey, which includes Il radioactive materials v	ork area from a permit, contact EHS to schedule a walkthrough of the proposed a contamination survey, removal of all radiation symbols, and any equipment that will need to be transferred from the current authorized work/storage area to a new e radioactive materials inventory.
		Section 9:	Requesting Change in Permit Status
	Requesting Inactive Status The PI/researcher will ma		terials use permit, but will not store or use radioactivity.)

 Prior to approval of changing to inactive status by the RSC, the following must be verified by EHS: 1. All radioactive materials (i.e., stock vials, working materials, sealed sources, and waste) must be removed from the lab and turned in to EHS. 2. A contamination survey must be conducted of the work area, storage area, and equipment used with radioisotopes. The wipe tests must be negative for removable surface contamination. NOTE: The lab/work/storage area(s) will remain as an authorized use area(s) on the permit. However, the permit holder must contact EHS before resuming use of radioactive materials. Termination of Radioactive Materials Permit
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Termination of Radioactive Materials Permit
(The PI/researcher will no longer have a permit to use radioactive materials.)
Please check one of the following:
☐ I am terminating my radioactive materials permit but I plan to continue working in my current laboratory.
☐ I am terminating my radioactive materials permit and I am moving out of my current laboratory.
☐ I am terminating my radioactive materials permit because I am leaving KSU.
Prior to terminating the radioactive materials permit, the following must be verified by EHS:
1. All radioactive materials (i.e., stock vials, working materials, sealed sources, and waste) must be removed from the lab and turned in to EHS.
2. A contamination survey must be conducted of the work area, storage area, and equipment used with radioisotopes. The wipe tests must be negative for removable surface contamination.
Upon termination of the radioactive materials permit, the PI/researcher will be informed in writing by the RSC.
Section 10: Signatures
As the individual responsible for this project, I confirm that the information contained in this application is true and accurate and, to the beny knowledge, conforms with the requirements described in Chapter 391-3-17: Georgia Rules and Regulations for Radioactive Materials, the KSU Radioactive Materials License, the KSU Radioactive Materials Program, and the KSU Radiation Safety Committee Policies and Procedure confirm that this project does not unnecessarily duplicate previous experiments. No changes will be made to the permit status, procedures, radioactive isotopes, or radiation work areas described in the approved version of this permit document without prior written notification to and approval by Kennesaw State University's Radiation Safety Committee. I understand that failure to comply with any of the aforemention requirements will jeopardize KSU's license to work with radioactive materials and my privileges to maintain a radioactive materials permit under the license.
Name of Permit Holder:
Signature of Permit Holder: Date: