

PROJECT RENEWAL FORM

- 1. Name of Principal User \_\_\_\_\_ Position \_\_\_\_\_
- 2. Department \_\_\_\_\_ Ext. \_\_\_\_\_ Office \_\_\_\_\_
- 3. Title of Project \_\_\_\_\_
- 4. Has this project been discontinued? yes \_\_\_\_ no \_\_\_\_ . If yes, list final disposition of any remaining radioisotopes below.
  
- 5. Have there been any significant changes in the types and amounts of radioisotopes being used? yes \_\_\_\_ no \_\_\_\_ . If yes, state changes below.
  
- 6. Have there been any significant changes in the laboratory procedures being used? yes \_\_\_\_ no \_\_\_\_ . If yes, state changes below.
  
- 7. Remarks:
  
- 8. Signed \_\_\_\_\_ Date \_\_\_\_\_

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Radiation Safety Officer Evaluation

Approve Renewal \_\_\_\_\_ Disapprove \_\_\_\_\_

Reason(s) for disapproval:

Signed \_\_\_\_\_  
(Radiation Safety Officer)

Date \_\_\_\_\_