

# UCSF X-Ray Machine Use Authorization

## Laboratory Information

Principle User: Chris Waddling

Your Supervisor: \_\_\_\_\_

## Personnel Information

Name: \_\_\_\_\_

Department: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Watched "Double Edged Sword" and "HHMI Radiation Safety" videos  
<http://www.msg.ucsf.edu/XRayLab/HHMIRadSafety.html> and  
<http://www.msg.ucsf.edu/XRayLab/DoubleEdgedSword.html> on:    /    /

Attended UCSF X-Ray Lab Radiation Safety Training Session on:    /    /

Read the Personal Safety Checklist for X-Ray Diffraction  
([http://www.msg.ucsf.edu/XRayLab/safe\\_practices.html](http://www.msg.ucsf.edu/XRayLab/safe_practices.html)) on:    /    /

Familiar with and have available the reference "UCSF Radiation Safety Training Manual" <http://www.msg.ucsf.edu/XRayLab/RSTM.pdf>

User signature: \_\_\_\_\_ Date: \_\_\_\_\_

Principal User signature: \_\_\_\_\_ Date: \_\_\_\_\_