

Northeastern University

Office of Environmental Health & Safety Forms

Office of Environmental Health & Safety

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Request for Radiation Exposure History Form

Office of Environmental Health and Safety, Northeastern University

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Northeastern University

Request for Radiation Exposure History



Date:					
To Whom It May Concern:					
The following individual was occupationally exposed to rad 105 CMR 120.000, Northeast radiation exposure history (incomplete to the contract of the contract o	iation during ern University	that time. In y Environmen	order to comply that Health and S	with the provisions afety requests this i	
Name: Last, First Maiden	SSN	D.O.B.	From	To	
Please forward exposure repor	360 HUNT OFFICE (170 CULI	TINGTON AV	E MENTAL HEALTI	H AND SAFETY	
Sincerely,					
Christopher S. Bingel Radiation Safety Program Ma	nager				
	CERTIFIC	CATE FOR T RECOR	THE RELEASE O	F	
To Whom It May Concern:					
I hereby authorize and released to office of Environm					
Signature		Date			