

**ALASKA DEPARTMENT OF ENVIRONMENTAL
CONSERVATION**

**CURRENT OCCUPATIONAL EXTERNAL RADIATION
EXPOSURE**

See Instructions on the Back

IDENTIFICATION

1. Name (Print -- Last, first, and middle)	2. Social Security Number
3. Date of Birth (Month, day, year)	4. Name of Licensee or Registrant

OCCUPATIONAL EXPOSURE

5. Dose Recorded for (Specify: Whole Body skin of whole body; or hands and forearms, Feet and ankles.)	6. Whole Body Dose Status (rem)	7. Method of Monitoring (e.g. Film Badge -- FB; Pocket Chamber -- PC; Calculations -- Calc.) X or Gamma _____ Beta _____ Neutrons _____
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8. Period of Exposure (From -- To)	9. X or Gamma	Dose for the Period (rem)	10. Beta	11. Neutron	12. Total	13. Running total for Calendar Quarter (rem)
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LIFETIME ACCUMULATED DOSE

14. Previous Total (rem)	15. Total Quarterly Dose date rem	16. Total Accumulated Dose (rem)	17. Perm. Accum. Dose 5(N018) (rem)	18. Unused Part of Perm. Accum. Dose (rem)