

HARVARD UNIVERSITY RADIATION & SAFETY OFFICE

Dosimetry Transaction Form

Permit Holder: _____

Series Code: _____

Trans Type	Binary #	O T O	Part #	Badge Type	Name	SS#	Sex M/F	DOB	Training	User Type

Form Completed By: _____

Date: _____

Entered In Computer: _____

Date: _____

Transaction Type

- A = Add
- C = Change
- R = Reactivate
- S = Spare
- T = Terminate

User Type

- A = Ancillary Worker
- R = Radiation Worker
- S = Supervisory
- T = Summer Student