



**STATE OF CONNECTICUT**  
**DEPARTMENT OF ENERGY ENVIRONMENTAL PROTECTION**  
**RADIATION SAFETY OFFICER OR ASSOCIATE RADIATION**  
**SAFETY OFFICER TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION**  
**[10 CFR 35.57, 35.50]**



Name of Individual

☐ RSO☐ ARSORequested Authorization(s) *The license authorizes the following medical uses (check all that apply):*

- ☐ 35.100    ☐ 35.200    ☐ 35.300    ☐ 35.400    ☐ 35.500    ☐ 35.600 (remote afterloader)  
☐ 35.600 (teletherapy)    ☐ 35.600 (gamma stereotactic radiosurgery)    ☐ 35.1000 (\_\_\_\_\_)

**PART I -- TRAINING AND EXPERIENCE****(Select one of the five methods below)**

\*Training and Experience, including board certification, must have been obtained within the 7 years preceding the date of application or the individual must have obtained related continuing education and experience since the required training and experience was completed. Provide dates, duration, and description of continuing education and experience related to the uses checked above.

☐ **1. Board Certification**

- a. Provide a copy of the board certification.
- b. If the board certification process has been recognized by the Commission or an Agreement State under 10 CFR 35.50;
  - (i) Go to the table in 5c and describe training provider and dates of training for each type of use for which authorization is sought.
  - (ii) Stop here
- c. If the board certification was issued on or before October 24, 2005 and is listed in 10 CFR 35.57 (a)(2);
  - (i) Provide documentation demonstrating that the individual was using the requested materials and uses on or before October 24, 2005;
  - (ii) Stop here

**OR**☐ **2. Current Radiation Safety Officer (RSO) or Associate Radiation Safety Officer (ARSO) Seeking Authorization to Be Recognized as a RSO or ARSO for the Additional Medical Uses Checked Above**

- a. Use the table in section 5.c. to describe training in radiation safety, regulatory issues, and emergency procedures for the additional types of medical use for which recognition as RSO or ARSO is sought.
- b. If board certified, provide a copy of the certificate and stop here.
- c. If not board certified and not listed on a medical use license as an RSO before January 14, 2019, skip to and complete Part II Preceptor Attestation.

**OR**☐ **3. Authorized User (AU), Authorized Medical Physicist (AMP), or Authorized Nuclear Pharmacist (ANP) identified on a license or permit in accordance with 10 CFR 35.50 (c)(2)**

- a. Provide license number.
- b. Use the table in section 5.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.
- c. Stop here.

**OR****Affirmative Action, Equal Employment Opportunity and Americans with Disabilities**

The Connecticut Department of Energy and Environmental Protection is an Affirmative Action/Equal Opportunity Employer that is committed to complying with the requirements of the Americans with Disabilities Act (ADA). Please contact us at (860) 418-5910 or [deep.accommodations@ct.gov](mailto:deep.accommodations@ct.gov) if you: have a disability and need a communication aid or service; have limited proficiency in English and may need information in another language; or if you wish to file an ADA or Title VI discrimination complaint.

**RADIATION SAFETY OFFICER OR  
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TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

☐ **4. Individuals applying simultaneously to be the RSO and AU on a new license**

- ☐ a. Documentation of training and experience to be a new AU is attached
- ☐ b. The new license application is attached.
- ☐ c. Stop here.

**OR**

☐ **5. Structured Educational Program for Proposed RSO or ARSO**

a. Classroom and Laboratory Training

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation			
Radiation protection			
Mathematics pertaining to the use and measurement of radioactivity			
Radiation biology			
Radiation dosimetry			

**Total Hours of Training:**

**RADIATION SAFETY OFFICER OR  
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TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

**5. Structured Educational Program for Proposed RSO or ARSO (continued)****b. Supervised Radiation Safety Experience**

*(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)*

Description of Experience	Location of Training/ License or Permit Number of Facility	Dates of Training*
Shipping, receiving, and performing related radiation surveys		
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides		
Securing and controlling byproduct material		
Using administrative controls to avoid mistakes in administration of byproduct material		
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures		
Using emergency procedures to control byproduct material		
Disposing of byproduct material		
Licensed Material Used (e.g., 35.100, 35.200, etc.)+		

+ Choose all applicable sections of 10 CFR Part 35 to describe radioisotopes and quantities used: 35.100, 35.200, 35.300, 35.400, 35.500, 35.600 remote afterloader units, 35.600 teletherapy units, 35.600 gamma stereotactic radiosurgery units, emerging technologies (provide list of devices).

**RADIATION SAFETY OFFICER OR  
ASSOCIATE RADIATION SAFETY OFFICER  
TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

**5. Structured Educational Program for Proposed RSO or ARSO (continued)**

## b. Supervised Radiation Safety Experience (continued)

*(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)*

Supervising Individual	License/Permit Number listing supervising individual as a Radiation Safety Officer or Associate Radiation Safety Officer
<div style="display: flex; justify-content: space-between;"> <div> The supervising individual is authorized as the for the following medical uses: </div> <div> <input type="checkbox"/> Radiation Safety Officer or the  <input type="checkbox"/> Associate Radiation Safety Officer </div> </div>	
<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> 35.100</div> <div style="width: 50%;"><input type="checkbox"/> 35.200</div> <div style="width: 50%;"><input type="checkbox"/> 35.300</div> <div style="width: 50%;"><input type="checkbox"/> 35.400</div> <div style="width: 50%;"><input type="checkbox"/> 35.500</div> <div style="width: 50%;"><input type="checkbox"/> 35.600 (remote afterloader)</div> <div style="width: 50%;"><input type="checkbox"/> 35.600 (teletherapy)</div> <div style="width: 50%;"><input type="checkbox"/> 35.600 (gamma stereotactic radiosurgery)</div> <div style="width: 50%;"><input type="checkbox"/> 35.1000 ( _____ )</div> </div>	

## c. Describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license for the RSO or types of use for which the ARSO will be listed on the license.

Description of Training	Training Provided By	Dates of Training*
Radiation safety, regulatory issues, and emergency procedures for 35.100, 35.200, and 35.500 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.400 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - teletherapy uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - remote afterloader uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - gamma stereotactic radiosurgery uses		
Radiation safety, regulatory issues, and emergency procedures for 35.1000, specify use(s):		

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TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

**5. Structured Educational Program for Proposed RSO or ARSO (continued)**

- c. Training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license (continued)

Supervising Individual *If training was provided by supervising RSO, ARSO, AU, AMP, or ANP. (If more than one supervising individual is necessary to document supervised training, provide multiple copies of this page.)*

License/Permit Number listing supervising individual

License/Permit lists supervising individual as:

- ☐ Radiation Safety Officer      ☐ Associate Radiation Safety Officer  
☐ Authorized User      ☐ Authorized Nuclear Pharmacist      ☐ Authorized Medical Physicist

Authorized as RSO, ARSO, AU, ANP, or AMP for the following medical uses:

- ☐ 35.100      ☐ 35.200      ☐ 35.300      ☐ 35.400  
☐ 35.500      ☐ 35.600 (remote afterloader)      ☐ 35.600 (teletherapy)  
☐ 35.600 (gamma stereotactic radiosurgery)      ☐ 35.1000 ( \_\_\_\_\_ )

- d. Skip to and complete Part II Preceptor Attestation.

**PART II – PRECEPTOR ATTESTATION**

Note: This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each.

**First Section****Structured Educational Program for Proposed RSO or ARSO**

- ☐ I attest that \_\_\_\_\_ has satisfactorily completed  
 Name of Proposed RSO/ARSO  
 a structural educational program consisting of both 200 hours of classroom and laboratory training and one year of full-time radiation safety experience as required by 10 CFR 35.50(b)(1).

**AND**

**Second Section**

- ☐ I attest that \_\_\_\_\_ has training in  
 Name of Proposed RSO/ARSO  
 radiation safety, regulatory issues, and emergency procedures for the following types of use:

***Check all that apply:***

- ☐ 35.100      ☐ 35.200  
☐ 35.300      oral administration of less than or equal to 33 millicuries of sodium iodide I-131, for which a written directive is required  
☐ 35.300      oral administration of greater than 33 millicuries of sodium iodide I-131  
☐ 35.300      Parenteral administration of any radioactive drug that contains a radionuclide that is primarily used for its electron emission, beta radiation characteristics, alpha radiation characteristics, or photon energy of less than 150 keV, for which a written directive is required

**RADIATION SAFETY OFFICER OR  
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TRAINING, EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.57, 35.50] (continued)**

**PART II – PRECEPTOR ATTESTATION (continued)**

**Check all *that apply*:**

- ☐ 35.400
- ☐ 35.500
- ☐ 35.600 remote afterloader units
- ☐ 35.600 teletherapy units
- ☐ 35.600 gamma stereotactic radiosurgery units
- ☐ 35.1000 emerging technologies, including:

**Third Section**

**AND**

☐ I attest that

\_\_\_\_\_  
Name of Proposed Radiation Safety Officer or Associate Radiation Safety Officer

is able to independently fulfill the radiation safety-related duties as:

☐ A Radiation Safety Officer for a medical use licensee.

**OR**

☐ An Associate Radiation Safety Officer for a medical use licensee.

**Fourth Section**

**Complete the following for Preceptor Attestation and signature**

☐ I am the Radiation Safety Officer for

☐ I am the Associate Radiation Safety Officer for

Name of Facility: \_\_\_\_\_

License/Permit Number: \_\_\_\_\_

**C. CERTIFYING OFFICIAL**

I certify that the submitted information is true, accurate and complete to the best of my knowledge and belief and is on complete and accurate forms as prescribed by the commissioner without alteration of text.

Name of Preceptor (Typed or printed)

Telephone Number

Date

Signature

\* BY ENTERING MY NAME ABOVE, I AGREE THAT I AM PROVIDING MY LEGAL SIGNATURE, AND AM LEGALLY BOUND BY THE CERTIFICATIONS ABOVE.\*

WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. DEEP REGULATIONS REQUIRE THAT SUBMISSIONS TO DEEP BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECT. IN ACCORDANCE WITH THE PROVISIONS SECTION 22a-6, SECTION 53A-157B, AND SECTION 22A-158C OF THE CONNECTICUT GENERAL STATUTES AND IN ACCORDANCE WITH ANY OTHER APPLICABLE STATUTE, MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE STATE OF CONNCTICUT TO ANY MATTER WITHIN ITS JURISDICTION.