



Research Proposal

About this form

- ✓ The use of ionising radiation is governed by the [Protection from Harmful Radiation Act 1990](#) and its [Regulations](#). The acquisition and use of any radioactive material, irradiating apparatus or high-powered laser devices (Class 3B & Class 4) must be approved by the CSU Radiation Safety Committee (RSC or committee) before the material or apparatus is brought into the University or used by staff / students.
- ✓ **Please tell us if your application is URGENT. Work must not commence without written approval from the committee.**
- ✓ Use this form to provide details of your research proposal. The committee will check the information provided regarding the proposed substance/apparatus, the physical facilities to be used and the details of the members of the project team. It will then make its assessment of the proposal with regard to the proposed level of radiation safety, and the licences and experience of the members of the team for carrying out the proposed work.
- ✓ **Please note that this application only relates to the proposed use of radiation.**
If your research involves the use of animals, human subjects or restricted biological materials, separate approval may be required by the appropriate University committee. Please refer to the [Research Integrity and Compliance website](#)

Completing the form

DO NOT COMPLETE THIS FORM IN A WEB BROWSER. You will not be able to save your data or sign the form in a browser. First SAVE this form, then OPEN the file in Adobe Acrobat Reader or Adobe Acrobat Pro.

- The **Primary Contact** is responsible for completing and submitting this form to radiationsafety@csu.edu.au
- Electronic files with digital signatures are preferred.
- If you have any questions, please contact radiationsafety@csu.edu.au

Submitting the application

1. Before submitting your application, remember to attach any additional documents, such as such as copies of radiation licences, written approvals or additional pages of information relating to this form.
2. Ensure that **this form has been signed** before submitting the application.
3. Submit the complete application to radiationsafety@csu.edu.au
4. If your application is urgent, or if you want to commence work before the next [RSC meeting](#), please type '**URGENT**' in the subject line of your email when you submit your application.

All staff involved must have completed the Radiation General Induction training module online **before** they commence any work with radioactive substances or irradiating apparatus. Staff members can enrol themselves in the course, or contact the ELMO team (elmo@csu.edu.au) for enrolment assistance.

Notification of outcome

The nominated **Primary Contact** will receive notification of outcome by email once the request has been considered.

Do not assume a request has been granted until written approval has been received from the committee

1. Research project

Project title	
Proposed start date	
Proposed end date	
School / Faculty / Organisation / Unit <i>that the research is being conducted through</i>	
Is this a student project?	<input type="checkbox"/> Yes <input type="checkbox"/> No
List <u>ALL</u> states and/or countries where research involving radiation will occur	

2. Primary contact

Note: The Primary Contact is usually the Chief Investigator – or must be the Principal Supervisor for student research projects. The Primary Contact is responsible for ensuring the overall compliance of the research project.

Note: The Primary Contact is team member #1

Primary Contact full name (<i>incl. title</i>)	
Role in project team	
Staff/Student ID	
Email	
Work phone	
Mobile phone	
School / Faculty / Organisation / Unit	
Campus / Location	
Will this person work with radiation? If yes, provide details of activities, apparatus and/or substances	<input type="checkbox"/> Yes - licenced <input type="checkbox"/> No
Radiation user licence no. and expiry date	Expiry:
Radiation user licence condition/s	
Does this person have a personal monitoring device (PMD)?	<input type="checkbox"/> Yes <input type="checkbox"/> No



Has this person completed the Radiation General Induction training module? Please provide certificate.	<input type="checkbox"/> Yes <input type="checkbox"/> No
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3. Research project team

Enter the details of all people directly involved in the research project. The people listed will be required to sign this form. At least one team member must hold a current radiation user licence for the proposed work. **There is an expectation that team members are aware of all aspects of the project, including confidential material.**

Team member #2

Full name (<i>incl. title</i>)		
Role in project team		
Staff/Student ID		
Email		
Contact phone		
School / Faculty / Organisation / Unit		
Will this person work with radiation? If yes, provide details of activities, apparatus and/or substances	<input type="checkbox"/> Yes - licenced <input type="checkbox"/> No	
Radiation user licence no. and expiry date		Expiry:
Radiation user licence condition/s		
Does this person have a personal monitoring device (PMD)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Has this person completed the Radiation General Induction training module? Please provide certificate.	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Team member #3

Full name (<i>incl. title</i>)		
Role in project team		
Staff/Student ID		
Email		
Contact phone		
School / Faculty / Organisation / Unit		
Will this person work with radiation?	<input type="checkbox"/> Yes - licenced <input type="checkbox"/> No	



If yes, provide details of activities, apparatus and/or substances		
Radiation user licence no. and expiry date		Expiry:
Radiation user licence condition/s		
Does this person have a personal monitoring device (PMD)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has this person completed the Radiation General Induction training module? Please provide certificate.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Team member #4

Full name (<i>incl. title</i>)		
Role in project team		
Staff/Student ID		
Email		
Contact phone		
School / Faculty / Organisation / Unit		
Will this person work with radiation? If yes, provide details of activities, apparatus and/or substances	<input type="checkbox"/> Yes - licenced	<input type="checkbox"/> No
Radiation user licence no. and expiry date		Expiry:
Radiation user licence condition/s		
Does this person have a personal monitoring device (PMD)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has this person completed the Radiation General Induction training module? Please provide certificate.	<input type="checkbox"/> Yes	<input type="checkbox"/> No

If any of the staff members or students involved do not yet have a Personal Monitoring Device (PMD) issued by CSU for monitoring personal radiation exposure, contact Radiation Monitoring (radmon@csu.edu.au) to request one.

All staff and students must have a CSU PMD **before they commence any work** with radioactive substances or irradiating apparatus.

If there are more team members to list, please attach an additional page to your application.



4. Research project details

Background of the project

Project aim/s and rationale

Briefly outline the main experimental procedures of the work
(or attach a copy of your safe work procedures if this is a standard/recurring process)

Does the research project involve the exposure of human participants to ionising radiation?

- Yes – Complete the [Human participants checklist](#) and follow the additional instructions it contains.
Submit the checklist and all other supporting documents with this proposal.
- No



5. Radiation details

What is the location of the research activities involving radiation? (Building number and room number)	
What type of facility will be used?	
Does the facility meet the appropriate standards and regulations?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Provide specific details of all sources of ionising radiation to be used, including:

- a. substances and/or apparatus;
- b. the make, model, power output, exposure range, etc.

Explain the role of the radioactive materials, irradiating apparatus or non-ionising radiation (e.g. lasers) in the research work.

- c. Why are they required?
- d. Who will be using them?
- e. How will they be used, stored and disposed of (including all safety considerations)?

6. Signatures and approvals

9.1 Primary Contact

Declaration

By signing below:

- a. I certify that all details given in this proposal are correct.
- b. I will ensure the project is carried out in accordance with the Protection from Harmful Radiation Act 1990 and its Regulations, and the relevant standards and codes of practice listed on the university's Radiation Management Licence. I accept responsibility for the conduct of all procedures detailed in this application and for the supervision of all personnel delegated to perform such procedures.
- c. I will ensure that all personnel are aware of their responsibilities and roles in the project.



- d. I certify that the qualifications and experience of personnel involved in the project are appropriate to the procedures to be performed.
- e. I confirm that I have taken into account potential hazards to staff working with radiation in this project and have ensured that appropriate safety measures have been implemented.
- f. I confirm that all personnel have read this application and have agreed to comply with procedures as described and any conditions imposed by the committee.

Primary Contact full name (<i>incl. title</i>)		
Primary Contact signature and date		Date:

Instructions to the Primary Contact

After signing above with your digital signature, save and email a copy of this form to the next team member to review and sign (with all relevant attachments).

Once all signatories have reviewed and signed the form and returned it to you, submit the whole application via email to radiationsafety@csu.edu.au. Ensure all relevant supporting documents are attached.

We will notify you of the outcome via email within 10 working days of the decision.

For RSC meeting dates and agenda closing dates, please see the [RSC meeting dates](#).

To check on the status of your application, please email radiationsafety@csu.edu.au

9.2 Research team members *(if applicable)*

Instructions to the research team members

Review the entire application and read the declaration below. If you have any concerns or amendments, get in touch with the Primary Contact.

If you approve, sign below with your digital signature. Then email a copy of this form and all relevant attachments to the next team member to sign.

Once all signatories have reviewed and signed the form, **send it back to the Primary Contact**, who will submit it via email to radiationsafety@csu.edu.au. Ensure all relevant supporting documents are attached.

We will notify the primary contact of the outcome via email within 10 working days of the decision.

For RSC meeting dates and agenda closing dates, please see the [RSC meeting dates](#)

To check on the status of your application, please email radiationsafety@csu.edu.au

Declaration

By signing below:

- a. I confirm that I have read this application and understand my role in the project.
- b. I confirm that all details given in this proposal are correct.
- c. I declare that I will only undertake procedures that are consistent with my qualifications and level of experience.
- d. I will ensure the project is carried out in accordance with the [Protection from Harmful Radiation Act 1990](#) and its [Regulations](#), and the relevant standards and codes of practice listed on the university's Radiation Management Plan.



TEAM MEMBER #2 SIGNATURE

Full Name		
Signature and date		Date:

TEAM MEMBER #3 SIGNATURE

Full Name		
Signature and date		Date:

TEAM MEMBER #4 SIGNATURE

Full Name		
Signature and date		Date:

If there are more team members to list, please attach additional pages to your application.

All team members must sign to confirm that they have read this application and that all information is correct.

9.3 Facility manager/s *(if applicable)*

Instructions to facility manager/s

Review the entire application and read the declaration below. If you have any concerns or amendments, get in touch with the Primary Contact.

If you approve, sign below with your digital signature. Then email a copy of this form **back to the Primary Contact**.

Declaration

By signing below, I confirm that I have had the opportunity to review the information in this application.

FACILITY MANAGER #1 SIGNATURE

Full name <i>(incl. title)</i>		
Facility		
Email		
Contact phone		
Position / Role		
School / Faculty / Section / Organisation		
Campus / Location		
Facility Manager signature and date		Date:



FACILITY MANAGER #2 SIGNATURE

Full name (<i>incl. title</i>)		
Facility		
Email		
Contact phone		
Position / Role		
School / Faculty / Section / Organisation		
Campus / Location		
Facility Manager signature and date		Date:

If there are more facility managers to list, please attach an additional page to your application

Notes to Researchers following approval by the committee

Approval

- Work involving radiation **must not commence** without written approval from the committee, quoting a protocol number.
- Work must be conducted only in approved laboratories or in an area or manner approved by the committee.
- Receipt of approval by the committee does not exempt the radiation licence holder(s) from having to complete the Application to Acquire Radioactive Substances or the Application to Acquire Irradiating Apparatus forms prior to commencement of the research.


Conduct and Completion of Work

- The Primary Contact must ensure that any recommendations of the committee are met during the course of the work.
- The Primary Contact must submit a report to the committee on completion of the research, or annually if the work extends past 12 months. Use the relevant report form available on the [RSC website](#).
- Any radiation incidents or hazards must be reported immediately using the [online incident reporting system](#).

Changes to the Research Project

- If there are expected to be significant changes to the approved research project, a Variation Request must be submitted to the committee. These changes may include:
 - A change to the Primary Contact, supervisor/s or research project team members. Any persons added to the team will need to provide copies of relevant radiation licences, exemptions or written approvals if working with radiation.
 - A request for an extension beyond the date approved by the committee.
 - A change required to work methods/locations/etc. specified in the Research Proposal approved by the committee.
 - Unexpected events that arise (e.g. a significantly smaller number of recruits than anticipated, complaints from participants, etc.).
- Complete the Variation Request available on the [RSC Website](#).



 Submit form and attachments to radiationsafety@csu.edu.au

Approval - RSC Use Only		
Protocol Number	Signature	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>
RSC Presiding Officer		

