



# Laser User Registration Form

## About this form

- ✓ The use of ionising radiation is governed by the Radiation Control Act (NSW) 1990 and its Regulations. The acquisition and use of any radioactive material or irradiating apparatus must also be approved by the Charles Sturt University Radiation Safety Committee (RSC) before the material or apparatus is brought into the University or used by University staff / students. This includes both ionising and non-ionising radiation (ie laser or ultra-violet).
- ✓ Please **use this form to register as a user of Class 3B and Class 4 laser devices**

## 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.

- This checklist can be completed electronically.
- Digital forms and electronic signatures are preferred.
- If you have any questions, please contact [radiationsafety@csu.edu.au](mailto:radiationsafety@csu.edu.au)

## 1.Laser User Details:

Full name (incl title)	
Staff/Student ID	
Email	
Work phone	
Mobile phone	
School / Faculty / Organisation / Unit)	
Campus / Location	
Supervisor ( <i>if applicable</i> )	

## 2.Laser Device Details

Please tick all of the Classes of laser devices to be used. <b>NOTE:</b> Laser devices are labelled with their Class	<input type="checkbox"/> Class 3B <input type="checkbox"/> Class 4
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# 3. Signatures

## 3.1 Laser User

### Declaration

- I have read and understood the applicable sections of the *Charles Sturt University [Radiation Management Plan](#)*
- I know the location of the Facility's Safe Work Procedure/s for Laser devices and agree to adhere to them.
- I am aware of the *AS/NZS 2211.1 Safety of laser products Equipment classification, requirements and user's guide* and the relevant ARPANSA Guidelines.

Name of Laser User	
Date	
Signature	

## 3.2 Supervisor

Name of Supervisor ( <i>for students</i> )	
Date	
Signature	



Submit form and attachments to [radiationsafety@csu.edu.au](mailto:radiationsafety@csu.edu.au)

### Approval - RSC Use Only

Protocol Number	Signature	Date
RSC Presiding Officer		