

You must fill this form for each piece of equipment associated with X-rays hazards before earning access to the equipment.

Hereby, I <u>name:</u>	, <u>netID:</u>	certify, that:
<ul> <li>I have completed the self-study course "2-X-Ray Ope and passed corresponding test with a 100% score</li> </ul>	erator Safety Training" o	( <i>initials</i> ) on Canvas
I understand biological and radiological hazards asso	ociated with X-Rays	
I have received equipment specific safety training or	n following equipment:	
<ul> <li>I am aware of additional x-ray safety resources locat         <ul> <li><u>http://www.fss.txstate.edu/ehsrm/program</u></li> </ul> </li> </ul>		
User signature: Dat	e:	
Please fill this form and deliver to MSEC front de	esk at RFM 3 <sup>rd</sup> floor (RFI	M3205).

ARSC staff area. Please do not write in this box.

□ Confirm quiz was completed in Canvas with 100% score.

□ Scan and email to ehs@txstate.edu

□ File to ARSC share drive folder

 $\hfill\square$  Put hard copy to ARSC archives