

Delegation of Authority - Without Signing Authority

Memo To: Radiation Safety Officer

From: _____

Subject: Delegation of Authority

You, _____, have been appointed radiation safety officer and are responsible for ensuring the safe use of radiation. You are responsible for managing the Radiation Protection Program; identifying radiation protection problems; initiating, recommending, or providing corrective actions; verifying implementation of corrective actions; stopping unsafe activities; and ensuring compliance with regulations. You are hereby delegated the authority necessary to meet those responsibilities, including prohibiting the use of byproduct material by employees who do not meet the necessary requirements and shutting down operations, when justified, to maintain radiation safety. You are required to notify management if staff does not cooperate and does not address radiation safety issues. In addition, you are free to raise issues with the Nebraska Department of Health and Human Services at any time. It is estimated that you will spend _____ hours per week conducting radiation protection activities.

Signature of Management Representative

Date

I accept the above responsibilities,

Signature of Radiation Safety Officer

Date

cc: Affected department heads

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Signature of Management Representative

Date

I accept the above responsibilities,

Signature of Radiation Safety Officer

Date

cc: Affected department heads