

**AMENDMENT TO  
PERMIT FOR USE OF RADIOACTIVE MATERIALS**

Date: \_\_\_\_\_

1. Name: \_\_\_\_\_

2. Department: \_\_\_\_\_

3. Date of license application to be amended: \_\_\_\_\_

4. Amendment requested: \_\_\_\_\_

\_\_\_\_\_

5. Purpose of amendment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Does this amendment involve the use of animals? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, has the University Animal Care and Use Committee approved this project:  
Yes \_\_\_\_\_ No \_\_\_\_\_

\_\_\_\_\_  
Signature

Date received by Radiation Safety Officer: \_\_\_\_\_