**Note:** This requisition MUST be approved by the Radiation Safety Officer prior to ordering, transferring, or moving an x-ray generating device. Upon receipt or move, the Radiation Safety Officer must be notified. For orders or transfers, a Form A must be approved by the Radiation Safety Committee before use. Ordering means any method by which an x-ray generating device from off-campus comes to Georgia Tech (new purchase, donation, loan).

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[ ]  This is a requisition to order an x-ray generating device from an external vendor.

 Manufacturer:       Model:

 Maximum kV:       Maximum mA:

 Type of x-ray generating device:

 Use Location:

[ ]  This is a requisition to transfer an x-ray generating device from another Georgia Tech Authorized User to myself.

 Manufacturer:       Model:

 Serial Number:

[ ]  This is a requisition to move one of my x-ray generating devices to a new location on the Georgia Tech campus.

Manufacturer:       Model:

 Serial Number:

 New Use Location:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized User Name:

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

 Authorized User

Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Radiation Safety Officer