LSP-005

**Laser Worker Registration**

All personnel authorized to work on a Laser Permit are required to complete applicable trainings and submit form LSP-006. Once the training requirements have been satisfied, the Radiation Safety Office will provide confirmation of approval to the personnel listed below and to the Principal Investigator.

1. Most trainings are accessed through the [Tufts Learning Center](https://tufts.myabsorb.com/#/dashboard).
2. Submit this form to the Radiation Safety Office: [radsafety@tufts.edu](mailto:radsafety@tufts.edu)

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| **Tufts Learning Center Instructions** |
| **Get Started:** [Login to The Tufts Learning Center](http://learncenter.tufts.edu/).  We recommend using Firefox or Chrome browsers.  **Tufts Learning Center Tips:**   * If you have never logged into The Learning Center system, click the link above to create your account. The links to specific trainings below will work for you only after your account exists. * If you do not have Tufts user credentials (username and password for single sign-on), please contact [ovpr-knowledgedevelopment@tufts.edu](mailto:ovpr-knowledgedevelopment@tufts.edu) to request Tufts affiliate status. * Need some tips on how to navigate? Watch the [Learning Center Overview](https://tufts.myabsorb.com/files/LearningCenterOverview.mp4)  and check out the [FAQs](https://tufts.app.box.com/notes/320030638427?s=nmb6xaa12rx0rhqbq5kwfq19miap657z). |

1. **Permit Information**

|  |  |
| --- | --- |
| PERMIT NUMBER |  |
| PRINCIPAL INVESTIGATOR OF PERMIT |  |
| I confirm that I have read the permit listed above and any subsequent amendments to the permit. | |

1. **Laser Worker Information**

|  |  |  |  |
| --- | --- | --- | --- |
| NAME |  | Tufts UTLN |  |
| DEPARTMENT |  | | |
| PHONE # |  | E-MAIL |  |

1. **Required Training**

*Confirm that you have completed the required training module:*

Introduction to Laser Safety

**Registrant signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: **\_\_\_\_**/**\_\_\_\_**/\_\_\_\_

*By typing your name, you are submitting an electronic signature that confirms your understanding and*

*adherence to the above statements and* [*Laser Safety Policies and Procedures Manual*](https://viceprovost.tufts.edu/policies-forms-guides/laser-safety-policy-and-procedures-manual-tufts-university)*. This is considered legal documentation and confirmation of your agreement to execute all activities as approved.*

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| **Radiation Safety Office Use Only**  **Entered into database**  **Date:**    **Radiation Safety Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |