

Bangladesh Atomic Energy Regulatory Authority
E-12/A, Agargaon, Sher-e-Bangla Nagar
P.O. Box No. 240, Dhaka-1207

**Application for Approval of Nomination of
Radiation Control Officer (RCO)**

Part-I : Particulars of the Institution

1. Name and address of the institution
2. Name, designation and address of the head of the institution (the applicant) in block letters
3. Mode of Communication:
Phone:
During office hours
After office hours
Mobile:
Fax:
E-Mail:
4. This application is for
First time RCO approval/Renewal of RCO approval
Ref No.:
Date:
Valid till:
5. Details of radiation equipment/facilities/sources available in the institution
 - A. TELETHERAPY EQUIPMENT (Co-60/Cs-137/LA)
 - B. REMOTE AFTERLOADING BRACHYTHERAPY EQUIPMENT (Cs-137/Co-60/Ir-192)
 - C. SUPER VOLTAGE THERAPY EQUIPMENT
 - D. X-RAY EQUIPMENT (Therapy Equipment, Simulators, CT Scanners, Mammography, Dental X-Ray and Diagnostic X-ray Units).
 - E. NUCLEAR MEDICINE
 - F. BRACHYTHERAPY SOURCES
 - G. OTHERS (SPECIFY)
6. Details of radiation measuring/monitoring instruments:
7. Details of unusual occurrences that have taken place in the past. Include any radiation emergencies, loss or misplacement of sources, and transport incidents:
8. Details of radiation workers in the institution:

Part-2: Particulars of the RCO designate

1. Name of the person to be designated as RCO (in block letters)
2. Present designation of the nominee:

3. Address (in block letters)

Office address

Telephone:

Fax:

E-mail:

Residential address

Telephone

Permanent home address:

Telephone

4. Academic qualifications and training courses in radiation safety

5. Experience in radiation work

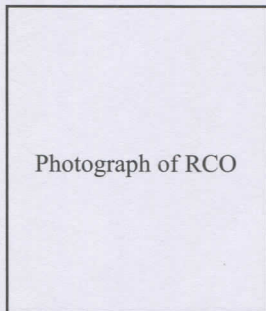
6. Radiation equipment/radioactive materials for which the RCO will be responsible.

7. Additional responsibilities proposed to be assigned to the RCO

8. a) I hereby certify that the information furnished above is correct to the best of my knowledge and belief.

b) I hereby undertake to abide by the conditions stipulated by the Competent Authority from time to time and follow guidelines in discharging the duties and responsibilities as RCO.

c) I further undertake to inform the BAERA immediately in case I am relieved of my services as RCO.



Photograph of RCO

Date:.....

Signature of RCO designate:.....

9. a) I hereby certify that all the statements made in the application are correct to the best of my knowledge and belief.

b) I hereby undertake to provide all necessary facilities to the RCO to discharge his duties and functions effectively.

c) I further undertake to inform the BAERA immediately in case the RCO is relieved of his duties.

Place:

Signature of the head of the institution (the applicant)

Date :

Name :

(Seal of the institution).