



TRANSFER OF RADIOLOGICAL TRAINING

Name: _____

ID Number: _____

Course:

- GERT (Course FN000241)
- Radiological Worker (Courses FN000470 and FN000471)
- RCT (RCT Core Academics, Course FN000277)

I have been provided training materials highlighting the Fermilab specific aspects of the academic portion of radiological training and have been given the opportunity to ask questions regarding this material. I do realize I am responsible for the site-specific aspects of these materials and the completion of the appropriate practical factors.

Signature: _____ Date: _____

Authorized Instructor: _____

Attach copy of training documentation from other DOE site and retain in individual's training records.