



ESH Training Transfer Sign-off Form

ENVIRONMENT, SAFETY & HEALTH DIVISION

This form is used to document that the relevant ESH program manager agrees that training received at another institution is equivalent to a SLAC-provided course. Upon completion of this form the worker is credited with having completed the required SLAC course.

To complete this form,

1. Supervisor / point of contact completes Section 1, attaches proof of training, and submits to relevant ESH program manager or designee
2. ESH program manager or designee reviews proof of training and, if appropriate, discusses SLAC-specific topics with the worker. Section 3 provides checklists for General Employee Radiological Training (GERT), Radiological Worker I Training (RWT I), and the SSRL Radioactive Material (RAM) orientation; for other courses the program manager may attach documentation of topics discussed.
3. ESH program manager or designee completes Section 2 and submits form (original), training record from other institution, and attachments to ESH Training at MS/84

Section 1

To be completed by supervisor / point of contact

Worker

| | | | |
|-----------|------------|----|------------------|
| Last name | First name | MI | System ID number |
|-----------|------------|----|------------------|

Institution / company name

Supervisor / Point of Contact

| | |
|---------------------------------|-----------------------------|
| Name, department, and extension | SLAC group or work location |
|---------------------------------|-----------------------------|

Section 2

To be completed by ESH program manager or designee

| SLAC-equivalent Course Number | Name | Course Credit Date |
|-------------------------------|------|--------------------|
| | | |
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ESH Program Manager or Designee

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|------|-----------|------|
| Name | Signature | Date |
|------|-----------|------|

Section 3

To be completed by ESH program manager or designee. For other courses may attach documentation of topics discussed

| GERT | RWT I | SSRL RAM Briefing |
|---|---|---|
| <input type="checkbox"/> Earthquake response | <input type="checkbox"/> Earthquake response | <input type="checkbox"/> Review SSRL SOP Briefing (SLAC-I-82B-00100-002) |
| <input type="checkbox"/> Emergency phone numbers | <input type="checkbox"/> Emergency phone numbers | <input type="checkbox"/> CAM familiarization |
| <input type="checkbox"/> Emergency response to impending beam | <input type="checkbox"/> Emergency response to impending beam | <input type="checkbox"/> CAM alarm actions |
| <input type="checkbox"/> Radiation areas High radiation area Contamination area Entry not allowed | <input type="checkbox"/> Radiation area controls High radiation area controls Contamination area controls RWP discussion | <input type="checkbox"/> Use of gloves for contamination control |
| <input type="checkbox"/> PPS entry <input type="checkbox"/> Demo <input type="checkbox"/> Videos Permitted access Controlled access No access Emergency lights Beam on actions | <input type="checkbox"/> PPS Entry <input type="checkbox"/> Demo <input type="checkbox"/> Videos Permitted access Controlled access No access Emergency lights Beam on actions | <input type="checkbox"/> Use of frisking instruments: <input type="checkbox"/> Ludlum 2241-2 <input type="checkbox"/> Eberline Rm 25 <input type="checkbox"/> TBM 15 |
| <input type="checkbox"/> RAM tags / release tags | <input type="checkbox"/> RAM tags / release tags | <input type="checkbox"/> Introduce HP technician(s) |
| <input type="checkbox"/> Not permitted to handle radioactive material, including accelerator housing material | <input type="checkbox"/> Removing material from RMMAs/ accelerator housings, request survey from RPFO | <input type="checkbox"/> Sample containments |
| <input type="checkbox"/> SLAC radiological postings | <input type="checkbox"/> SLAC radiological postings | <input type="checkbox"/> Work planning control and procedures |
| <input type="checkbox"/> Escorting visitors | <input type="checkbox"/> Instruments | |
| | <input type="checkbox"/> Klystron lab tour and survey (For klystron test stand operators only) | |
| | <input type="checkbox"/> No GERT or visitor in radiation areas, high radiation areas, or contamination areas | |