

Form 8:

**Application for a Radiation Safety Officer Certificate****Queensland  
Government**

**Privacy Statement:** The Department of Health provides this form under the *Radiation Safety Act 1999* so that you may apply for an Act Instrument. The information and documents collected for the purpose of this application may be accessible by authorised departmental persons. Certificate details of successful applicants will be publicly available on the department's register of holders of licences and certificates as required by the Act. The department will not disclose personal information or supporting documents to third parties without consent unless required or authorised by law.

**This application is to be completed by individuals seeking a Radiation Safety Officer Certificate.**

Client No. (if known):

To the Chief Executive:

Application No. (Qld Health use only):

**Part A: Details of applicant****1. Name and contact details**

Salutation  Surname  Given Names

Phone No.  Email Address

**2. Proof of identity**

Certified copies of proof of identity documents, as described on page 3 of this form, are to be provided. Attached?

**3. Address for correspondence**

Address

Suburb  State  Post Code

**4. What is your profession or occupation?**

**5. If applicable, provide evidence of your professional registration (e.g. extract from Ahpra)**

Evidence attached?

**Part B: Current licence and certificate status**

1. Do you hold a radiation safety officer certificate in Queensland or in another jurisdiction?

**If yes, provide a full copy of your certificate**

2. Do you hold a use licence in Queensland or in another Australian jurisdiction?

**If yes, provide a full copy of your licence**

3. Do you hold a possession licence in Queensland or in another Australian jurisdiction?

**If yes, provide a full copy of your licence**

**Part C: Term of certificate and associated costs****For applicants who currently hold a radiation safety officer certificate in Queensland**

application fee (non-refundable):

**For applicants seeking a new radiation safety officer certificate - select the term of the certificate required**

☐ 1 year

application fee (non-refundable) and certificate fee:

☐ 2 years

application fee (non-refundable) and certificate fee:

☐ 3 years

application fee (non-refundable) and certificate fee:

## Part D: Information to determine your suitability to hold a radiation safety officer certificate

A Radiation Safety Officer is expected to be:

- knowledgeable about the radiation related legislation, guidelines, codes of practice and standards relevant to the type of radiation practice
- knowledgeable and skilled in measuring and monitoring radiation, interpreting radiation measurements and applying radiation safety, protection and security principles
- knowledgeable about the biological effects of radiation; and
- competent in relation to performing the functions of a radiation safety officer relevant to the practice.

### 1. Type of radiation practice you wish to be a radiation safety officer for

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Chemical analysis practices         | <input type="checkbox"/> Veterinary diagnostic imaging practices | <input type="checkbox"/> Cosmetic laser related practices |
| <input type="checkbox"/> Borehole logging practices          | <input type="checkbox"/> Geotechnical measurement practices      | <input type="checkbox"/> Medical laser related practices  |
| <input type="checkbox"/> Cabinet inspection practices        | <input type="checkbox"/> Industrial gauging practices            | <input type="checkbox"/> Nuclear medicine practices       |
| <input type="checkbox"/> Dental diagnostic imaging practices | <input type="checkbox"/> Industrial radiography practices        | <input type="checkbox"/> Radiation therapy practices      |
| <input type="checkbox"/> Diagnostic imaging practices        |  |   |

Specify, if not listed above:

### 2. What are your formal qualifications? Copies of your qualifications must accompany your application.

### 3. What training have you undertaken that is relevant to the expectations of a radiation safety officer? Copies of your training certificates must accompany your application.

### 4. What is your specific experience in the radiation practice you wish to be radiation safety officer for?

Confirmation of this experience and any other relevant information must accompany your application.

Evidence of your qualifications, training and experience attached?

## Part E: Declaration

- |  |  |
|--|--|
| 1. Have you been convicted of an indictable offence?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Have you been convicted of an offence against this Act or a corresponding law?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Have you held a certificate under this Act, or a similar instrument under a corresponding law, that was suspended or cancelled? | <input type="checkbox"/> Yes <input type="checkbox"/> No |

If the answer is 'yes' to any of the above, please provide details of the offence, the nature of the offence and the circumstances of its commission. Applicants are advised that in order to ensure the requirements of the *Radiation Safety Act 1999* are met, the information contained in this application may be provided to relevant external agencies in certain circumstances.

Attach additional information, if required.

## Part F: Completion of Application

I hereby apply for a Radiation Safety Officer Certificate, as detailed in this application.

Signature of applicant:

Date:

## Proof of Identity Documents

If the licence is to be in the name of an individual, proof of identity documents must be submitted with the application. The application will not be accepted if this requirement is not met.

Please note that at least one document must contain a photograph of the applicant.

### Certification of Proof of Identity Documents

The copies of the identity documents must be certified by either:

- a commissioner for declarations
- justice of the peace
- notary public
- Police officer (certifying officer to include name, rank and name of their police station)
- Teacher (certifying individual to include name and teacher registration number)
- Ahpra registered health practitioner (certifying individual to include name and professional registration number)

The application will not be accepted if copies of your identity documents are not correctly certified.

Submit a certified copy of one primary identity document and a certified copy of one secondary identity document from the lists below.

### Primary identity documents

- ☐ 1. Australian birth certificate
- ☐ 2. Overseas birth certificate accompanied by a passport or Australian visa document issued by the Commonwealth department in which the Migration Act 1958 (Cwlth) is administered
- ☐ 3. A travel-related document under the Australian Passports Act 2005 (Cwlth)
- ☐ 4. Australian passport that is current or has not been expired for more than 2 years
- ☐ 5. Current foreign passport
- ☐ 6. Document evidencing Australian citizenship issued by the Commonwealth department in which the Migration Act 1958 (Cwlth) is administered
- ☐ 7. Australian driver licence that is current or has not been expired for more than 2 years

### Secondary identity documents

- ☐ 1. Current identification card issued by the Commonwealth or a State as evidence of the person's entitlement to a financial benefit
- ☐ 2. Account statement issued by a financial institution within the previous year
- ☐ 3. Document evidencing discharge from military service within the previous 2 years
- ☐ 4. Student identification card containing the person's photograph and signature that is current or has not been expired for more than 2 years
- ☐ 5. Document evidencing enrolment in a school, university, training institution or professional college within the previous 2 years
- ☐ 6. Document evidencing electoral enrolment within the previous 2 years
- ☐ 7. Utilities account statement issued by a utilities provider within the previous year
- ☐ 8. Notice of land valuation, water rates or council rates issued within the previous year

## Note for the Applicant

The *Information Privacy Act 2009* sets out the rules for the collection and handling of personal information by the Department of Health. For information about how the Department of Health protects your personal information, or to learn about your right to access your own personal information, please see our website at [www.health.qld.gov.au](http://www.health.qld.gov.au).

## How to Submit the Application

Please post your signed and completed application form, associated documentation and payment information to:

The Chief Executive  
c/- Public Health Licensing Unit  
Health Protection Branch  
Queensland Department of Health  
PO Box 2368  
FORTITUDE VALLEY BC QLD 4006

Your application will not be accepted unless the applicable payment is provided.

For further information about the submission of applications, please type 'Queensland radiation licensing' into your favourite browser and follow the prompts.

### Note:

*The application fee is not refundable if this application is not successful or if you decide to withdraw your application.*

## Fee to be Paid

Fees payable increase on 1 October each year. On 1 October 2023, the fees quoted in this application form were increased by 3.4% in line with Government's indexation policy.

## Payment Options

*(Note: This is a GST free item. Queensland Health ABN: 66 329 169 412)*

Payment of your application must be made via credit card. Complete payment details below and submit with your completed application.

**DO NOT EMAIL THIS PAYMENT PAGE AS SECURITY OF YOUR CREDIT CARD INFORMATION CANNOT BE ASSURED**

Name of Applicant:

Charge fee payable:

to my:

- ☐ MasterCard  
☐ Visa Card

Name on card:

Cardholder's  
signature:

Card number:

Expiry date: