

THE UNIVERSITY OF TEXAS AT ARLINGTON
Environmental Health & Safety Office

Pregnancy Declaration Withdrawal

Name:	
UT Arlington Number:	
Department:	
Phone Extension:	

I hereby voluntarily withdraw my pregnancy declaration or I am no longer pregnant. A review and/or copy of my exposure history will be available at the Environmental Health & Safety Office.

Declaration Date:	
Withdrawal Date:	

Signature

Date

Please contact UT Arlington's Radiation Safety Officer at 817-272-2185 if you have any questions.

You may be entitled to know what information The University of Texas at Arlington (UT Arlington) collects concerning you. You may review and have UT Arlington correct this information according to procedures set forth in UTS 139. The law is found in sections 552.021, 552.023 and 559.004 of the Texas Government Code.

I agree to inform of co-employment as a radiation worker while at UT Arlington as a radiation worker. If you are issued dosimetry, information will be furnished to the dosimetry vendor to provide lifetime tracking of dose and kept in a secure, confidential database, akin to a medical record. Information requested allows you to be unambiguously identified across institutions.

Internet Privacy Policy:

http://www.uta.edu/oit/policy/cs/web/internet_privacy.html