OCCUPATIONAL EXPOSURE HISTORY (OEH) FORM

Candidate's Name	
Employer	

Event Title	Interregional Training Course on Siting for Nuclear Power Plants, Including SMRs			
Event Reference	TN-INT2024-2500379			
Venue	Moscow, Russian Federation			
Dates	From: 10 May 2025 To: 18 May 2025			

Are you covered under an individual monitoring programme in your country? \Box YES \Box NO If yes,

- Starting date of the individual monitoring (mm/yyyy):
- please fill in the applicable fields below:

Quantity	Unit reported	Value during the previous five calendar years	Value during the current calendar year	
Effective dose ⁽¹⁾				
Equivalent dose to the lens of the eyes				
Equivalent dose to the extremities or to the skin				
OEH data provided or confirmed by ⁽²⁾ :	Name: Responsibility: Signature:			

Candidate's Signature: -----

Date⁽³⁾: -----

⁽¹⁾ Effective dose due to external AND internal exposure. If another quantity is reported, please indicate name and unit.

⁽²⁾ The OEH data is to be provided or confirmed by the radiation protection officer, the candidate's supervisor, or the provider of the individual monitoring service.

⁽³⁾ This form should not be older than six months before the date of the event.