

# ALARA Activities at DOE

## Submitting ALARA Project Descriptions for Future Annual Reports

Please fill out all items below and submit the form. (\*required fields)

\*Project Date:

\*Report Date:

\*Full Name:

\*Project Title:

\*Site Name:

\*Phone:

\*Email:

Mission Statement:

\*Project Description

\*Radiological Concerns:

*Total collective dose for the project*

\*Pre-job collective dose estimate:  person-mrem

\*Actual collective dose measured:  person-mrem

Effect on dose rates, airborne and/or surface contamination:

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Information on how the process implemented ALARA techniques in an innovative or unique manner:

Project staff involved:

Approximate cost of the ALARA effort:

Impact on work processes, in person-hours if possible (may be positive or negative):

*Point-of-contact for follow-up by interested professionals:*

\*POC Name:

\*POC Phone:

\*POC Email:

Submit the completed form, along with any pictures to support your story, by email to [REMS\\_support@orau.org](mailto:REMS_support@orau.org).