

OCCUPATIONAL EXPOSURE HISTORY (OEH) FORM

| | |
|-------------------------|--|
| Candidate's Name | |
| Employer | |

| | |
|------------------------|---|
| Event Title | Interregional Workshop on Enhancing Safeguards Infrastructure for States Embarking on Nuclear Power Programme |
| Event Reference | |
| Venue | Helsinki, Finland |
| Dates | From: 7 December 2024 To: 15 December 2024 |

Are you covered under an individual monitoring programme in your country? YES 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.