

OCCUPATIONAL EXPOSURE HISTORY (OEH) FORM

Candidate's Name	
Employer	

Event Title	Regional Train the Trainers Course on Radiological Emergency
Event Reference	TN-RER9161-2500770
Venue	Istanbul, Türkiye
Dates	From: 4 October 2025 To: 12 October 2025

Are you covered under an individual monitoring programme in your country? <input type="checkbox"/> YES <input type="checkbox"/> NO			
If yes,			
<ul style="list-style-type: none">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.