



## LASER REGISTRATION FORM

*Instructions: All Class 3b and 4 lasers are required to be registered with the University of Delaware Laser Safety Committee. Complete this form for each laser to be registered and forward to*

Laser Safety Officer, Occupational Health and Safety

FAX: 831-1528

Principal Investigator: \_\_\_\_\_ Phone: \_\_\_\_\_

Laser Manufacturer: \_\_\_\_\_

Model Name/Number: \_\_\_\_\_

Serial Number: \_\_\_\_\_

UD Property Tag Number: \_\_\_\_\_

Laser Location: \_\_\_\_\_

Building

Department

Room Number

Laser Type (Nd:YAG, HeNe, etc): \_\_\_\_\_

Classification (3b or 4): \_\_\_\_\_

Wavelength(s) (nm): \_\_\_\_\_

Beam Diameter at laser output (mm): \_\_\_\_\_

Beam Divergence (mrad): \_\_\_\_\_

Continuous Wave: Average Power (Watts): \_\_\_\_\_

or

Repetitively Pulsed: Energy (Joules per pulse): \_\_\_\_\_

Pulse duration (s): \_\_\_\_\_

Pulse repetition frequency (Hz): \_\_\_\_\_

or

Single Pulse: Pulse duration (s): \_\_\_\_\_

Energy (Joules per pulse): \_\_\_\_\_

Purpose or Use: \_\_\_\_\_

Comments:

\_\_\_\_\_  
Principal Investigator's Signature

\_\_\_\_\_  
Date