



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, Environmental 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