REIRS and REMS Automated Dose History Request Form Help

The REIRS and REMS Automated Dose History Request feature allows authorized users to obtain an NRC Form 4 and/or DOE-equivalent Form for up to ten monitored individuals (see Disclaimer and Limitations). The Forms will be emailed to the requester in Adobe PDF format and will be encrypted and password protected. If reports for more than one individual are requested, they will be combined in one PDF file.

Complete the dose history request form as follows. All fields are required except Comments. *If you are an individual requesting records, just enter NA in the fields that do not pertain to you.*

Requester

1) Requester Name	The full name of the person requesting the report.
2) Title	The occupational title of the person requesting the report *or enter self*. (e.g. Facility RSO)
3) Organization/Company	The name of the company employing the person making the request *or enter NA*. (e.g. XYZ Corporation)
4) E-mail Address	Valid email address of the requestor. The dose history report will be emailed back to the requestor using this address.
5) Phone Number	Phone number of the requestor, including area code.
6) Comments	Comments or notes about the request. Field is optional.

Monitored Individual(s)

Dose history reports may be requested for up to ten individuals. For each person you must supply the following:

7) Full Name	Full, legal name of the monitored individual including the first name and middle name if available. Avoid initials if at all possible.
8) ID Number	Typically this will be the Social Security Number. Please do not use dashes in the individual's SSN. If another ID number has been used to identify this individual when monitored at licensees, enter this ID number.
9) ID Type	Select the ID type that corresponds to the ID number provided for the monitored individual.
10) Date of Birth	Provide the date of birth of the monitored individual to ensure the unique identification of the individual.
11) Record Categories	All available radiation exposure monitoring records will be searched. This includes, but is not limited to, NRC licensee monitoring records, NRC employee monitoring records, DOE monitoring records, and certain Agreement State licensees that have voluntarily reported records to the central repository. Please refer to the NRC Disclaimer and Limitations and DOE Disclaimer and Limitations for a general description of what records may be available. A separate dose history report will be generated for each database and combined into one PDF.
12) Requester-assigned password	Enter your own user-assigned password from **12 to 20 characters long** or request will not go through. This password should be known only by the requestor to ensure that the dose report is kept from public dissemination. The report that will be provided contains data subject to the Privacy Act of 1974. The PDF file containing the dose history report will be encrypted and will require this password to open the file. **Be sure to retain this password for your reference when you receive the encrypted report.**
13) Release Forms	For each monitored individual, the requester **MUST** submit a signed release form in order to have the request processed. If you are an organization requesting a dose history for individuals, use the organization release form. **If you are a member of the public, or you are requesting your own dose history**, use the individual release form.
14) Submit Request	Click on the button to submit the request. All fields except Comments must be completed. If you have made a mistake in more than one field and wish to start over, click on the "Clear Form" button to reset the input form.

Please go to the How to Submit a Dose History Request page for additional information regarding your request.