



**VERIFICATION OF LICENSURE FOR
 RADIATION TECHNOLOGIST OR TECHNICIAN**

For State, Federal Government, or Background Check Agencies Only

The Delaware Radiation Control Regulations require state certification of radiation technologists and technicians who administer radiation to patients in the healing arts. Licensed practitioners such as physicians, dentists, veterinarians, and certified dental assistants are exempt from this certification requirement.

Complete the top portion of this form with name, social security number, date of birth, and Delaware certification number of the individual. Please allow three weeks for processing. Incomplete forms will be returned. **Fax this form with your request on agency/company letterhead to 302-739-3839**, or mail to the following address. You may also submit your own form with this Delaware form.

Delaware Division of Public Health
 Office of Radiation Control
 417 Federal Street
 Dover, DE 19901

Name: _____

Social Security Number: _____

Date of Birth: _____ Certification # _____

For office use, only

Status: Current Expiration Date: _____

Expired/Terminated

No record of this individual

No record of Sanctions*

Verified by: _____

Date: _____

Board Seal

To download forms or obtain a copy of the regulations, please visit our web site at <http://www.dhss.delaware.gov/dhss/dph/hsp/orc.html>

*Contact Office at 302-744-4546 if additional information is required.