

VOID SHEET

TO: License Fee Management Branch  
FROM: John Doe  
SUBJECT: VOIDED APPLICATION

Control Number: 89168  
Applicant: The University of Akron  
Date Voided: July 11, 1990  
Reason for Void: No response to

deficiency letter.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

John Doe 07/11/90  
Signature Date

Attachment:  
Official Record Copy of  
Voided Action

FOR LFMB USE ONLY

Final Review of VOID Completed:

- Refund Authorized and processed
- No Refund Due
- Fee Exempt or Fee Not Required

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*aprs*

Log completed   
Processed by: ep

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90 JUL 23 08:38  
U.S. N.R.C.  
LIC FEE MGMT. BRANCH



JUL 11 1990

The University of Akron  
Radiation Safety Office  
ATTN: Helmar H.A. Dollwet, Ph.D.  
Akron, Ohio 44325

SUBJECT: REQUEST FOR AMENDMENT TO LICENSE NO. 34-03279-03 DATED  
APRIL 6, 1990 AND OUR REQUEST FOR ADDITIONAL INFORMATION  
DATED MAY 18, 1990.

Gentlemen:

We requested in the above mentioned letter that you respond to us within 30 days. A check of our files indicate that we have not received a response from you to date.

You are hereby notified that we consider your application abandoned and have voided your request. This action is without prejudice to resubmission.

Should you resubmit **Within One Year of This Date.** Submit in duplicate and refer to Control Number 89168.

Sincerely,

Original Signed By  
John D. Jones  
Materials Licensing Section

RIII

*JD*  
jdjones  
07/11/90

F  
MAY 18 1990

The University of Akron  
Radiation Safety Office  
ATTN: Helmar H.A. Dollwet, Ph.D.  
Akron Ohio 44325

Gentlemen:

We have reviewed your application dated April 6, 1990 requesting an amendment to your NRC License No. 34-03279-3 and find that we will need the following information in order to complete our review:

Please provide more detailed information regarding the training of Dr. Darlene G. Walro. This should include a summary of the specific nature of the training received at each of the institutions including topics covered and the approximate amount of time devoted to each subject.

In addition, please provide more detailed information regarding the actual experience Dr. Walro has had using each of the isotopes mentioned in item 4. Information should include the names and addresses of those persons under whom she worked, what was their experience and training, and the nature of the work that she performed under those authorized users.


We will continue our review of your application upon receipt of this information. Please reply in duplicate, within 30 days, and refer to Control Number 89168.

If you have any questions or require clarification on any of the information stated above, you may contact us at (708) 790-5625.

Sincerely

Original Signed By  
John D. Jones  
Materials Licensing Section

R111

  
jones/jdj  
05/18/90

April 6, 1990

U.S. Nuclear Regulatory Commission  
Region III  
799 Roosevelt Road  
Glen Ellyn, Illinois 60137

Attn: Chief, Nuclear Materials Safety and  
Safeguards Branch

Dear Sir or Madam:

We wish to have our NRC license No. 34-03279-3 amended to include  
a new faculty member:

Dr. Darlene G. Walro

I have included a summary of her training and experience.

Sincerely,

*Helmar H. A. Dollwet*

Helmar H.A. Dollwet, Ph.D.  
Professor of Biology and  
Radiation Safety Officer

Enc.  
lmb

U.S. N.R.C.  
IN. FEE MGMT. BRANCH

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*epur*  
**FEE EXEMPT**  
*176.11(a)(9)*  
*4/29/90*

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APR 16 1990  
REGION III

APR 16 1990

TRAINING AND EXPERIENCE OF EACH INDIVIDUAL NAMED IN ITEM 4

8. Type of Training	Where Trained	Duration of Training	On the job (circle)	Formal* Course (Circle)
a. Principles and practices of radiation protection.....	Ohio Univ. Athens, OH	1 day	<input checked="" type="radio"/> Yes <input type="radio"/> No	Yes <input checked="" type="radio"/> No
	UT-Austin Austin, TX	1 day		
	NEOUCOM Rootstown, OH	1 day		
b. Radioactivity measurement standardization and monitoring techniques and instruments .....	Ohio Univ. Athens, OH	1 day	<input checked="" type="radio"/> Yes <input type="radio"/> No	Yes <input checked="" type="radio"/> No
	NEOUCOM Rootstown, OH	1 day		
c. Mathematics and calculations basic to the use and measurement of radioactivity...	Ohio Univ. Athens, OH	1 day	<input checked="" type="radio"/> Yes <input type="radio"/> No	Yes <input checked="" type="radio"/> No
	NEOUCOM Rootstown, OH	1 day		
d. Biological effects of radiation.....	Ohio Univ. Athens, OH	1 day	<input checked="" type="radio"/> Yes <input type="radio"/> No	Yes <input checked="" type="radio"/> No
	Univ Mass Med Cntr Worcester, MA	1 day		
	NEOUCOM Rootstown, OH	1 day		

9. Experience With Radiation (Actual use of radionuclides or equivalent).

Isotope	Maximum Amount	Where Experience Was Gained	Duration of Experience	Type of Use
I-125	0.1 m Ci	Univ. Mass Med Cntr Worcester, MA	2 yr	
S-35	1 m Ci	Univ Texas-Austin Austin, TX	1 yr	
		Ohio Univ Athens, OH	5 yr	
		Univ Texas-Austin Austin, TX	1 yr	
P-32	2 m Ci	NEOUCOM Rootstown, OH	3 yr	
		Ohio Univ. Athens, OH	5 yr	
		Univ Texas-Austin Austin, TX	1 yr	
H-3	0.5 m Ci	NEOUCOM Rootstown, OH	3 yr	
C-14	0.5 m Ci	NEOUCOM Rootstown, OH	3 yr	

\*Although I didn't take a formal course, I was examined by a written test and passed. Verification of the test and results can be obtained from Michael Powell, RSO, NEOUCOM.