

**Appendix A: UNM Laser Registration Form**

(Required for Class 3B, Class 4, and any Class with embedded 3B or 4)

**1. Principal Investigator Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ UNM ID: \_\_\_\_\_

College/Institution: \_\_\_\_\_ Department: \_\_\_\_\_ Position: \_\_\_\_\_

Physical mailing address: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Phone (Office): \_\_\_\_\_ Phone (Cell): \_\_\_\_\_

**2. Laser Location**

Campus: \_\_\_\_\_ College/Institution: \_\_\_\_\_ Department: \_\_\_\_\_

Building Name: \_\_\_\_\_ Room No.: \_\_\_\_\_

**3. Laser Identification and Properties**

New laser: \_\_\_\_\_ Alteration of an existing laser: \_\_\_\_\_ Relocation of an existing laser: \_\_\_\_\_

Serial No.: \_\_\_\_\_ Manufacture: \_\_\_\_\_ Model No.: \_\_\_\_\_

Date Manufactured: \_\_\_\_\_ Use code: \_\_\_\_\_

Laser Class: \_\_\_\_\_ Embedded Class 3B: \_\_\_\_\_ Embedded Class 4: \_\_\_\_\_

Laser type (Ex. Argon, He-Ne, diode, Dye, Ti:Sapphire, Nd:YAG, Nd:YLF): \_\_\_\_\_

Operation mode: \_\_\_\_\_ Maximum output power if CW: \_\_\_\_\_

Repetition frequency if pulsed: \_\_\_\_\_ Maximum output pulse energy: \_\_\_\_\_

Pulse duration seconds: \_\_\_\_\_ Operational wavelength(s) (nm): \_\_\_\_\_

Beam diameter: \_\_\_\_\_ Beam delivery method: \_\_\_\_\_

Current laser status: \_\_\_\_\_ Divergence (mrad): \_\_\_\_\_

Hazards associated with this laser (check all that apply)

Eye: \_\_\_\_\_ Skin: \_\_\_\_\_ Electrical: \_\_\_\_\_ Chemical: \_\_\_\_\_ Laser generated air contaminants: \_\_\_\_\_ Other: \_\_\_\_\_

Do you have adequate protective eyewear for this laser?

Yes: \_\_\_\_\_ No: \_\_\_\_\_ (if yes, list the wavelength(s) and Optical Density for each wavelength)

Is laser portable and used in more than one location? Yes: \_\_\_\_\_ No: \_\_\_\_\_

If portable list all other locations that is used: \_\_\_\_\_

Provide a brief description of the laser application: \_\_\_\_\_

**Note: For single laser system, this is the end of the registration. Please see back page for further instructions**

**If this laser is part of a laser system, please provide the following information of each component.**

**4. Component #1**

Serial No.: \_\_\_\_\_ Manufacture: \_\_\_\_\_ Model No.: \_\_\_\_\_

Operation mode: \_\_\_\_\_ Output power/energy: \_\_\_\_\_

Repetition Frequency: \_\_\_\_\_ Wavelength (s): \_\_\_\_\_

**5. Component #2**

Serial No.: \_\_\_\_\_ Manufacture: \_\_\_\_\_ Model No.: \_\_\_\_\_

Operation mode: \_\_\_\_\_ Output power/energy: \_\_\_\_\_

Repetition Frequency: \_\_\_\_\_ Wavelength (s): \_\_\_\_\_

**6. Component #3**

Serial No.: \_\_\_\_\_ Manufacture: \_\_\_\_\_ Model No.: \_\_\_\_\_

Operation mode: \_\_\_\_\_ Output power/energy: \_\_\_\_\_

Repetition Frequency: \_\_\_\_\_ Wavelength (s): \_\_\_\_\_

**7. Component #4**

Serial No.: \_\_\_\_\_ Manufacture: \_\_\_\_\_ Model No.: \_\_\_\_\_

Operation mode: \_\_\_\_\_ Output power/energy: \_\_\_\_\_

Repetition Frequency: \_\_\_\_\_ Wavelength (s): \_\_\_\_\_

Form completed by: \_\_\_\_\_ Date: \_\_\_\_\_