

**FAC-SIMILE of the REQUEST FOR PERMISSION**  
**to be written on official paper of the Institute/University**

To the Director of  
Laboratori Nazionali del Gran Sasso dell'INFN  
Via G. Acitelli, 22  
67100, Assergi (L'Aquila)  
Fax +39 0862/437556

Please allow permission for..... to stay at LNGS  
for the period from ..... to ..... care of:

- Experiment.....

According to the in force Italian law on occupational health and safety, we declare that the worker is suitable of carrying out the activity, for which the access to the LNGS is requested, and that he has received the necessary information and training.

- She/He deals with ionizing radiation sources at LNGS      YES       NO

*(if the answer is "YES", the applicant must contact immediately the Prevention and Protection Service of LNGS for the proper authorization: Eng. Antonio Giampaoli; tel.: +39-0862-437239; fax +39-0862-437556 e-mail: [antonio.giampaoli@lngs.infn.it](mailto:antonio.giampaoli@lngs.infn.it), <http://spp.lngs.infn.it/document.php?page=0>. In the meantime, therefore, the applicant is not authorized to carry out any activity which implies radiation risk at LNGS)*

It is underlined that the applicant, as .....<sup>1</sup>

- Is insured for accident/injuries and radiation risk      YES       NO

In case of need and for further information please contact  
.....  
tel. .... e-mail .....

Place and Date: .....

Stamp and Signature

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<sup>1</sup> Employee of other organization; Employee of a University; Undergraduate; Postgraduate/research student; Other, please specify.