



Northern Illinois University Certificate of Classification for Embedded Laser Systems

Principal Investigator _____ Department _____
Building _____ Room # _____

Laser information: Manufacturer _____ Model _____

<u>Class</u>	<u>Wave length</u>	<u>Power</u>	<u>Type:(HeNe,</u>
<input type="checkbox"/> 3b	_____	Watts: _____	<u>Yag,etc.)</u>
<input type="checkbox"/> 4	Pulse rate _____	Joules: _____	_____
<u>Operation</u>	Pulse width _____	Peak power: _____	_____
<input type="checkbox"/> CW			_____
<input type="checkbox"/> Pulsed			

Under normal operation is the Laser;

1. Completely Enclosed. Yes, No (If No, then system cannot be Class 1)
 - a. If yes, describe method of enclosure

2. Interlocked access panels: Yes No (If No, then system cannot be Class 1)
 - a. If yes, describe method of beam termination when interlock is defeated (blocked, power down, etc.)

 - b. All access panels clearly marked with "Danger Laser" labels Yes No (If no then system cannot be Class 1)

3. Viewing ports constructed of protective and appropriate wavelength laser filtering material Yes No
 - a. Clearly marked by manufacturer Yes No (If no then proof of correct wave length filtration is necessary)
 - b. Other method of protecting viewing ports _____

4. Standard Operating Procedure for maintenance/alignment when access panels open Yes No (a Standard Operating Procedure is required if the laser is Class 4)

Principal Investigator Signature _____ Date ___/___/___

Laser Safety Officer Signature _____ Date ___/___/___

Laser Safety Committee Chairman Signature _____ Date ___/___/___