

Lab Safety Contract

Name _____

Period _____

You must read, mark, and sign this sheet before you are allowed to participate in any lab activities or experiments.

____ Always conduct behavior appropriately and help maintain a safe a productive work environment for others and yourself

____ Make sure to follow all instructions both stated by the teacher and written in the lab handout

____ No food, drinks, or gum will be allowed in the lab area at anytime

____ Do not touch, use, or play with any materials until instructed by the teacher to do so. Any horseplay or unsafe behaviors will result in immediate removal from the lab

____ Know the locations of the fire extinguisher, broken glass container, eye wash, first aid kit, sink, fire blanket, shower, and emergency exits.

____ Know the correct safety protocol for any accidents

____ Immediately inform instructor of any injuries or chemical spills within the lab. NEVER try to cover up an accident

____ Inform instructor of any allergies to chemical or other lab materials

____ Always wear the appropriate protective equipment (goggles, gloves, hair ties, etc.) necessary for the lab

____ Make sure lab station is appropriately cleaned and maintain during all labs

____ Begin clean up 5 minutes to the end of class and return the lab station to its original condition after completion of the lab

____ Do not remove any chemicals or equipment from the lab room, unless instructed to do so by the teacher

Please list any allergies you have _____

Do you wear contact lenses? Yes _____ No _____

Emergency contact name and phone number _____

I understand and agree to all of the terms stated in the above lab contract and agree to abide by them. (Hand in this second page before participating in labs. You should keep the first page for reference)

Students name (Print) _____

Student Signature _____

Date _____

Parent Signature _____

Date _____