

Laboratory Safety Contract – Mrs. Bauck

Palm Harbor University High School

SAFE AND EFFECTIVE LABORATORY PRACTICES

1. I will follow the directions and safety procedures instructed in the lab.
2. I will pay attention to what I am doing at all times.
3. I will get permission from the teacher to enter the stockroom or lab area.
4. I will tie back long hair and secure loose clothing.
5. I will not eat, drink, or chew gum during the lab.
6. I will read the entire activity before I do it.
7. I will stay seated when not working with lab materials.
8. I will leave the lab equipment alone until the lab starts.
9. I will carry all equipment with two hands.
10. I will never taste or smell anything in the lab unless instructed to do so by my teacher.
11. I will know where the safety equipment is located (eyewash, first aid kit, fire extinguisher, fire blanket).
12. I will wear safety glasses or goggles any time chemicals, biological specimens, heat or glassware are used or when there could be eye damage due to a flying projectile (e.g., broken springs, rock fragments).
13. I will never point a container at anyone that contains substances that are visibly reacting.
14. I will not leave a lit burner unattended.
15. I will keep my safety glasses or goggles on until my teacher gives the OK.
16. I will report to the teacher any accident (spill, breakage, etc.) or injury (cut, burn, etc.), immediately.
17. I will put away equipment and clean up my table when I am done with the lab.
18. I will use proper ventilation when working with volatile substances or poisonous vapors.
19. I will not remove chemicals, specimens or equipment from the classroom.
20. I will wash my hands before I leave the room.
21. I will have dry hands before touching an electrical switch, plug or outlet.
22. I will immediately report damaged electrical equipment such as frayed cords, exposed wires and loose connections.

CUT and RETURN bottom portion to Mrs. Bauck.

STUDENT NAME (please print): _____

Are you color blind? Yes No List any allergies: _____

AGREEMENT

I, _____ (student's name), have read and agree to follow all of the safety rules set forth in this contract. I realize I must obey these rules to ensure my own safety and that of my instructors and fellow students. I will maintain a safe lab environment. I will closely follow the instructions provided by the instructor. I am aware that any violation of this safety contract that results in unsafe conduct in the laboratory or misbehavior on my part may result in a detention or referral, a failing grade on the lab activity, and removal from the laboratory.

Student Signature

Date

Dear Parent or Guardian:

You should be informed regarding the school's effort to create and maintain a safe laboratory environment. With the cooperation of the instructors, parents and students, a safety instruction program can prevent, correct, and eliminate potential hazards. No students will be permitted to perform laboratory activities unless this contract is signed by both the student and parent/guardian and is on file with the teacher.

Your signature on this contract indicates that you have read it and are aware of the measures taken to ensure the safety of your son/daughter in the science laboratory and will instruct your son/daughter to uphold his/her agreement to follow these rules and procedures in the laboratory.

Parent/Guardian Signature

Date