

# SCIENCE LABORATORY SAFETY CONTRACT

- I will act responsibly at all times during a laboratory experiences.
- When entering the lab classroom, I will wait for instructions before touching any equipment, chemicals, or other materials in the laboratory area.
- I will not eat food, drink beverages, or chew gum in the laboratory. I will not use laboratory glassware as containers for food or beverages.
- I will keep my area clean during a lab.
- I will wear appropriate safety glasses/goggles when working with heat, glass or chemicals and protective apron when necessary.
- I know the locations and operating procedures of all safety equipment including the first aid kit, eyewash station, safety shower, fire extinguisher, and fire blanket. I know where the fire alarm and the exits are located.
- I will immediately notify a teacher of any accident (spill, breakage, etc.) or injury (cut, burn, etc.), no matter how trivial it may appear.
- I know my school's Emergency Response Team Plan and the people to contact in the event of an emergency. I know what to do if there is a fire drill during a lab period.
- I will handle all living organisms used in a lab activity in a humane manner. Preserved biological materials are to be treated with respect and disposed of properly.
- I will tie back long hair, remove jewelry and wear shoes with closed ends (toes and heels) while in lab/classroom.
- I will never work alone in the lab/classroom.
- I will not take chemicals or equipment out of the classroom unless instructed to do so.
- I will dispose of all chemical waste properly (according to teacher's directions).
- All chemicals in the laboratory are to be considered dangerous. I will not touch, taste, or smell any chemicals unless specifically instructed to do so.
- I will not enter or work in the storage room unless supervised by a teacher.

## AGREEMENT

I, \_\_\_\_\_, have read each of the statements in the Science Laboratory Safety Contract and understand these safety rules. I agree to abide by the safety regulations and any additional written or verbal instructions provided by the school district or my teacher. This contract ensures that students and the teacher know exactly what is expected of them.

1. Please list any food or contact allergies (e.g. allergy to peanuts, plant, latex, etc.)

\_\_\_\_\_

2. Please provide a daytime emergency contact:

(Contact person) \_\_\_\_\_ (Contact phone number) \_\_\_\_\_

3. Student Signature \_\_\_\_\_ Date \_\_\_\_\_

4. Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

Adapted from [http://www.flinnsci.com/Documents/miscPDFs/Safety\\_Contract.pdf](http://www.flinnsci.com/Documents/miscPDFs/Safety_Contract.pdf)