STUDENT SAFETY CONTRACT

I recognize that the laboratory is a safe place in which to work and learn if I conduct myself in a responsible manner, and I am willing to accept that responsibility. Accordingly, I agree to follow the safety guidelines set forth in my textbook and in my supplementary materials I am given, and I agree to follow the teacher's instructions. In addition, I will abide by the following safety rules at all times:

- I will provide the teacher with health information that might affect my health and safety in the classroom (see back).
- I will handle all laboratory equipment properly.
- I will familiarize myself with the laboratory techniques involved in each activity before I attempt to perform the activity.
- I will learn the location and proper use (as applicable) of the safety equipment in the classroom.
- I will report any accident—*no matter how trivial it may seem*—to the teacher immediately.
- I will familiarize myself with the procedures to be followed in case of fire or other emergency in the laboratory.
- After each lab activity has been completed, I will turn off the water and disconnect all electrical equipment. I will dispose of all chemicals according to the teacher's directions, and I will return all materials and equipment to their proper places.

I understand and agree to follow the safety rules described above. I have filled out the information on the back of this form.

_____ _____
(Date) (Period)

_____
(Student's Printed Name)

_____
(Student's Signature)

_____
(Parent's Signature)

TURN OVER →

Please indicate any allergies or other health concerns that the teachers should be made aware:

_____

_____

_____

_____

Please indicate which of the following you wear at this time:

_____ prescription glasses

_____ contacts

_____ neither

Please update this information during the school year as needed.