

Safety Contract

THE PURPOSE OF THIS CONTRACT IS TO MAKE EACH STUDENT AWARE OF HIS/HER OWN RESPONSIBILITY FOR SAFETY IN THE SCIENCE LABORATORY.

I WILL:

- Follow all instructions given by the teacher.
- Protect my eyes, face, hands, and body when performing science experiments.
- Carry out good housekeeping practices.
- Know where to get help fast in case of an accident.
- Conduct myself in a responsible manner at all times.

Note: Students must realize the implications of improper behavior. Misbehavior will require the immediate removal of any student from the laboratory experience.

I, _____, have read and agree to follow the safety regulations set forth above as well as other safety regulations given to me by my teacher. I will follow all oral and written instructions provided by the teacher and/or school administration.

Student's Signature: _____ Date: _____

Parent's Signature: _____ Date: _____