

Southwood Secondary School
Safety Contract

The purpose of this contract is to make the student aware of his/her responsibility for laboratory safety:

I will:

- Follow all instructions given by the teacher
- Protect my eyes, face, hands and body when involved in science experiments
- Carry out good housekeeping practices (keep a tidy lab bench, use common sense when working with glassware)
- Know the location of the first aid kit, eye wash station, fire blanket and fire extinguisher
- Conduct myself in a responsible manner at all times (understand that there is no running or horseplay in the lab area)
- Not bring any food, gum or drinks into the science room
- Not use any electronic devices such as cell phones, ipods, tablets in the science lab unless part approved by the teacher for the specific activity

I, _____ (name of student), have read and agree to follow the safety regulations as described in the Safety Contract above. I will follow the oral and written instructions provided by the teacher and the school administration.

Signatures

Please sign below indicating you have read and understood this safety contract.

Student

Parent/Guardian

Date

Date