

STUDENT SAFETY CONTRACT

The National Science Teachers Association urges that students be required to review and sign a "contract" that defines acceptable behavior in a school science setting. The contract will be covered with the student and makes the student aware of the basic rules and their definition. The student reviews these basic rules plus a more detailed set given with this contract. The student then signs the contract agreeing to abide by these rules and any additional safety directions provided by these science instructor or school administration.

THE PURPOSE OF THE CONTRACT IS TO MAKE THE STUDENT AWARE OF HIS OR HER RESPONSIBILITY FOR LABORATORY SAFETY.

Students should also realize the implications of improper behavior. For example, courts have ruled that students can be just as guilty of negligence as teachers in laboratory accidents.

I WILL:

- 1) Read the lab. I will also listen and follow all instructions given by the teacher.
- 2) **Protect** eyes (wear goggles), face, hands, and body when involved in science experiments.
- 3) Carry out **good housekeeping** practices.
- 4) Know where to get **help** fast.
- 5) Know the **location of safety equipment** (first aid, eye wash, fire blanket, fire exits, fire pulls, fire extinguisher, safety shower, lab aprons, and goggles)
- 6) Take the **responsibility** to conduct myself in a responsible manner at all times. I will use the lab equipment and computers in a responsible manner. I understand that violation of this contract will have severe consequences.
- 7) Wash my hands after lab activities and before I leave the classroom.
- 8) Use this lab activity as an **instructional and integral** part of my learning activity.
- 9) **Stay aware** that some of the materials that I will be working with can damage my clothes and body tissues. I will work in a responsible way.
- 10) **Respect** that this room is a SAFE ZONE. I will not harass, degrade, spread rumors, humiliate others for any reason; these may include ethnic background, religion, gender, age, disability, orientation, choice of apparel, thoughts, and friends or associates.

I,, have read and agree to accept the following safety regulat forth in this contract. I will closely follow the oral and written instructions provided by the teacher and/or school administration.		
Student Signature	Date	
Parent/Guardian Signature	 Date	

Please note: For the safety of the other students and of the instructor, no labs will be performed or credited without this completed contract of awareness and responsibility. Violation of this contract could mean failure and/or dismissal from this class.