

FAIRFIELD PUBLIC SCHOOLS

LABORATORY SAFETY AGREEMENT

At all I times when I am working or visiting the laboratory, I will use good laboratory safety practices. While a lab is in progress, I will abide by the following safety rules:

1. Know the exact locations of the safety equipment and know how to use them.

2. No student shall perform a lab unless an instructor is present.

3. Do only assigned experiments, following the designated procedures, check all chemical and disposal labels.

4. Wear departmentally approved eye protection at all times during a laboratory exercise, including cleanup.

5. NEVER leave an experiment in progress unattended.

6. Wear sensible clothing: No high heels, open-toed shoes, sandals, or bare feet. No shorts, tank tops, or bare midriffs. No coats. Hair MUST be tied back.

7. Wear protective apron when instructed to do so.

8. No food or beverages are allowed into the lab. This includes gum, candy, life savers, cough drops and water bottles. NEVER put anything into your mouth.

9. Keep the laboratory bench and floor area clean at all times, and free of items not related to the experiment. All backpacks, purses, etc. must be out of the walking areas.

10. Do not handle equipment not assigned to you.

11. Do not enter teacher preparation area unless instructed to do so.

12. Handle equipment and chemicals as instructed. If unsure, ASK.

13. Students pay for all breakage at replacement cost.

14. Throw broken glass in specially marked containers. DO NOT throw ANYTHING down the drain unless instructed to do so. Clean spills immediately according to instructions. Dispose of waste materials as indicated by the instructor,

15. NEVER pour a liquid back into its container. Share it or dispose of it as indicated by the instructor.

16. NO NONSENSE or HORSEPLAY. Expulsion from lab results in a zero grade and cannot be made up.

17. REPORT ANY ACCIDENT IMMEDIATELY.

I have carefully read these rules and recognize my responsibility to abide by them.

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_ Parent signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­\_\_\_\_\_\_

DATE \_\_\_\_\_\_\_\_\_\_\_\_\_ Student signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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ADDENDUM FOR CONTACT LENS WEARERS

Contact lens wearers are at an additional risk in a laboratory situation due to the fact that many lenses absorb gases and allow those chemicals to come in direct contact with the surface of the eye for long periods of time.

The Science Department of the Fairfield Public Schools recommends that contact lenses not be worn in laboratory situations. However, we do provide special goggles for those who choose to wear their lenses in the lab.

If you wear contacts, you must inform your teacher so that, in the unlikely event of an accident, proper steps can be taken. Please fill out the portion below, sign it, and have your parent or guardian sign also. This must be returned to your teacher as soon as possible.

\_\_\_\_\_\_\_\_\_\_\_\_ I will be wearing contact lenses in the lab.

\_\_\_\_\_\_\_\_\_\_\_\_ I will not be wearing contact lenses in the lab.