**Science Safety Contract**

**The following list of safety procedures pertains to my safety in the science classroom:**

 Horseplay in the science classroom is dangerous. I will practice appropriate conduct in the classroom, such as walking, using a quiet voice, keeping my hands off others, etc. I will keep my mind and eyes on what I am doing.

 I will follow written and verbal instructions concerning procedures and/or precautions. They are created for my protection.

 **I will keep my personal belongings in the location that is designated by my teacher.**

 Experiments done in class are for instruction. They are planned to teach an idea or concept. I will perform only authorized experiments.

 I will handle only those chemicals or equipment for which I have received instruction. I will be extremely careful with handling and storage of chemicals, equipment, and sharp objects.

 Chemicals are labeled to identify them. I will always read the label to make sure I am using the correct substance. Mixing and handling chemicals or other substances can be dangerous. I will not do so unless instructed in a planned and approved experiment.

 When working with fire, I will not reach across a flame or bring any unauthorized substances near flames. I will not burn objects. I will keep long hair away from fire. I will never leave a burner unattended.

 I will dress appropriately. I will tie long hair back; avoid wearing open shoes, dangling jewelry, and floppy sleeves.

 Safety equipment is provided in the science classroom in case of an emergency. I know how and when to use this equipment. I know where the eyewash station, fire blanket, and extinguishers are located.

 It is required by law to wear safety goggles for many laboratory situations. To prevent injury, I will wear my goggles as instructed by the teacher.

 Broken glass is dangerous. If an accident occurs, I will report it immediately to the teacher.

 I will be careful not to write in books, on tables, on lab counters, or on desks. I realize that this is a form of vandalism and I will be responsible for my behavior.

 I will clean up after myself and my lab team. A messy area contributes to accidents.

 I will not eat, drink, or chew gum in the science classroom, unless given permission from my teacher.

 Cheating and or plagiarism will result in failure of the assignment. All work turned in by my classmates and me must be completely our own.

**Please sign and return this form to the teacher.**

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Period: \_\_\_\_\_\_\_\_\_\_

I have read the science safety rules. I understand these rules have been created for my protection. I agree to follow them and do my part to make my science classroom a safe place to learn.

**For the Parent/Guardian:**

Laboratory activities are integral to the science curriculum. Student safety is our highest priority, and is enhanced by awareness and caution. Please help us to assure a safe and positive learning experience for your child by completing the items below:

Does the student have any health problems, physical limitations, or allergies? YES NO

If yes, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Does the student wear contact lenses? YES NO

I have reviewed the above student guidelines for laboratory safety with my child. I will direct any questions I may have concerning laboratory activities to the science teacher.

Parent/Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_