LABORATORY SAFETY CONTRACT

Students working in the laboratory must observe the following rules in order to ensure their own safety and that of their fellow students.

1. You must wear eye protection. At a minimum, this means safety glasses with side shields. Safety goggles should be worn for operations involving hazardous materials that may splash. Anyone who refuses to wear eye protection will be asked to leave the laboratory.
2. You must wear closed-toe shoes.
3. You must wear clothing or protective aprons or lab coats that cover at least the upper arms and the legs down to the knees.
4. No eating, drinking, smoking, or applying makeup in the lab.
5. No horseplay is permitted in the lab.
6. Do not perform any unauthorized experiments.
7. Use a fume hood for all substances that produce strong odors or fumes.
8. Do not remove any materials from the laboratory.
9. Dispose of all waste properly. Ask your instructor for directions if you are not sure what to do.
10. Do not work alone in the laboratory.
11. Only use equipment in good condition. Don’t use chipped or cracked glassware.
12. Clean up all spills immediately. Ask your instructor for assistance if you are not sure what to do.
13. Read labels carefully to be sure that you are using the correct reagent for an experiment.
14. Know the location of the eye wash, safety shower, and fire extinguisher in the lab.
15. All accidents and injuries should be reported to the instructor immediately.
16. Pregnant students should inform their instructor about their pregnancy. The decision about whether or not to work in the laboratory during pregnancy is made by the student and her physician.

To Be Filled Out by the Student and Submitted to the Stockroom or Instructor during Check-In:

Course: ____________________________________________________

Person to contact in case of emergency: _______________________________

Telephone number for emergency contact: ____________________________

I have read and understand the laboratory safety rules above, and I agree to follow them.

Printed Name: ______________________    Signature: ______________________    Date: __________