

PLTW Student Safety Contract

Directions: Please read the following rules and sign at the bottom of the sheet. Sign the bottom of the sheet and have your parents sign, as well. Signing at the bottom of the sheet states that you will adhere to the following safety rules while you are performing every lab. Laboratory activities are a huge part of the classroom. Safety is the number one priority for students, teachers, and parents.

Safety Rules:

1. Be responsible and no horseplay in the lab.
2. Do not move equipment around the classroom. Equipment must stay at your desk.
3. Follow written and verbal instructions carefully. If you do not understand a direction, ask the instructor before proceeding.
4. Never work alone. No student may work in the lab without the teacher present.
5. Do not touch any equipment until you are instructed to do so.
6. Use equipment as instructed. Unauthorized experiments are prohibited.
7. Clean up after yourself and make sure the lab station is ready for the next group of students.
8. Know the location and operating procedures for all safety equipment: eyewash station
9. Know what to do if there is a fire drill during a lab period. Make sure all electrical equipment is turned off before leaving the room.
10. Be aware of how your clothing, hair and jewelry might inhibit your performance in the lab and cause safety concerns and make adjustments when necessary.
11. Wear goggles when instructed to do so by your instructor. They must remain on the entire period or until you are told you may remove them.
12. Report any accidents IMMEDIATELY no matter how trivial it may seem. Please don't wait until after class to go to the nurse.
13. Never handle broken glass with your bare hands. Your instructor will help you clean the mess up.
14. If you don't know how to use a piece of equipment, ask your instructor.

Agreement:

I, _____ (student's name) have read and agree to abide by all of the safety rules set forth in this contract. I realize that I must obey these rules to ensure my own safety, and that of the others in my classroom. I am aware that a violation of these rules may result in my being removed from the lab, receiving a failing grade and/or dismissal from the course.

Student Signature: _____ Date: _____

Dear Parent or Guardian:

I feel that you should be informed regarding the school's effort to create and maintain a safe science classroom/laboratory environment. You should be aware of the safety rules I expect your student to obey while in the lab. Please read the list of safety rules and sign this form. I will keep this form on file for this school year. Your signature on this contract indicates that you have read this Student Safety Contract, are aware of the measures taken to ensure safety in the classroom and will instruct your son/daughter to uphold this agreement.

Parent Signature: _____ Date: _____