



Lab Safety Contract

Welcome to the Science Lab! In order for the student to participate in lab this safety form must be returned!

I'd like to welcome all students and parents to our science learning lab at Pacific Elementary! My name is Mrs. Liu, and I will be working with grades K -5 in room 10. I am very excited to begin a year of fun investigations and experiments and would like to discuss safety as a major concern at school.

Very important information for students and parents:

The National Science Teachers Association urges that students be required to review and sign a contract that defines acceptable behavior in a school laboratory setting. Because lab safety is a #1 priority of Pacific, students and parents are asked to sign a Lab Safety Contract.

Basic rules are listed in Pacific's school rules and the rules of your regular classroom teacher. In addition to these rules, student lab safety rules are taught and discussed in science lab. Students then sign the contract agreeing to abide by these rules and any additional safety directions provided by the teacher or school administration. The parent signs as a witness to the student's agreement.

The purpose of this contract is to make the student aware of his/her responsibility for laboratory safety. If you have any questions, I can be reached at cliu@mbusd.org.

I will:

- Follow all instructions given by teachers.
- Ask questions when I don't understand.
- Protect eyes, face, hands, and body when involved in science experiments.
- Keep the work area clean and orderly.
- Know the location of the first aid box, sink, and fire extinguisher.
- Know the emergency evacuation route.
- Conduct myself in a responsible manner at all times so I do not disrupt the learning or teaching process, nor put anyone's safety in jeopardy.

I, _____, Room #: _____, have read and agree to follow the safety regulations set forth above and on the following pages. I will closely follow the verbal and written instructions provided by the Science Lab Teacher, my classroom teacher, and Pacific Elementary School.

Date: _____

Student Signature: _____

Parent Signature: _____

Allergy information! Please list all allergies the teacher should be aware of?

Please check off below to give permission for the following activities:

I give permission for my student to handle animals if needed in lab. (Please list any animal allergies above.)