Lab and Investigations Expectations and Safety Guidelines

1. **Always come to lab class prepared. You must complete any assigned pre-reading *before* coming to class.**
2. **Upon teachers’ request, you will be required to wear a lab apron and eye protection**.
   * If you should get a chemical in your eye, wash it with flowing water at the eyewash station for at least 5 minutes; get medical attention immediately.
   * If any chemicals come into contact with your skin, **immediately wash them off**, using plenty of water. Notify your teacher whenever you spill a chemical.
3. **You must be in compliance with the uniform policy** in order to participate in lab work and investigations.

* Long hair and loose clothing (ties, baggy sleeves) should be confined so as not to be in danger of getting near a burner and catching fire.
* Wear closed shoes in the lab. Sandals, open-toed shoes, or similar footwear is not permitted in the lab.

1. **No horseplay or practical jokes;** they may cause a serious accident or injury.
2. **Be aware of your surroundings.** Lack of attention to surroundings can cause unintended, but serious, accidents.
3. **No eating or drinking** is permitted in the laboratory. Many chemicals in the laboratory are poisonous.
4. **Never taste any chemicals** in the laboratory.
5. **Do not inhale deeply when testing odors;** test odors by gently wafting the odors toward your nose with a cupped hand and sniffing carefully.
6. **Never perform unauthorized experiments.**
7. **Call the instructor at once** in case of a fire or accident.
8. When diluting acids, **always pour the acid into the water** rather than the water into the acid; this helps keep the acid from splashing.
9. **Be extremely careful when using a laboratory burner.** Keep hair, loose clothing, etc. away from the flame. Turn off your laboratory burner when it is not in use. When you are done using the burner, make sure all gas valves are turned off.
10. **Learn the proper use of equipment in the lab.** This includes standing to read measurements, properly supporting equipment that is being carried, and following all guidelines for use of equipment in the lab or classroom. Misuse of equipment may result in disciplinary action.
11. **Dispose of broken glassware, used chemicals, and unused chemicals in the designated areas.**
12. **Clean up your work area and return equipment to its proper location when your experiment is completed.** Wash your hands with soap and water before leaving the lab.
13. **Enjoy learning!**

Lab and Investigations Expectations and Safety

**STUDENT SAFETY CONTRACT**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a student at ASU Preparatory Academy Phoenix, have thoroughly read the *Lab and Investigations Expectations and Safety Guidelines* and do hereby agree to follow all safety rules and procedures given therein. I will conduct myself in a safe and conscientious manner in the laboratory. I will not perform any unauthorized lab procedure. I understand that misbehavior in the lab or failure to follow safe lab procedures could cause a serious accident. I further understand that a violation of these rules could result in my not being allowed to participate in future lab exercises.

Student Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENT/GUARDIAN CONTRACT**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, parent (or guardian) of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have read the *Lab and Investigations Expectations and Safety Guidelines*. I understand the importance of safety in the science laboratory, and I will encourage my son or daughter to abide by the laboratory safety rules and procedures. I understand that laboratory exercises provide my child with the opportunity to use their knowledge to solve problems while working with the best technology available to the school. I give my permission for my child to participate in this program.

Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_