



Name: _____ Date: _____ Group: _____

PROCESS SKILLS PRIMER

Laboratory Safety Contract

School Name: _____

I, _____ agree to follow the safety
(Print name)

guidelines outlined by the Texas Safety Standards. These rules include:

- Following the oral and written instructions of the experiment as given by the teacher.
- Using all personal safety equipment when conducting scientific investigations, including chemical splash goggles, protective gloves, and laboratory apron,
- Being aware of my own safety and the safety of others at all times.
- Know the location of the laboratory safety equipment, including the safety shower, eye/face wash station, fire extinguisher, and fire blanket.
- Know what to do in case of an emergency.
- Clean up after the laboratory investigation is complete, including washing glassware and disposing of excess chemicals in a safe and responsible manner.

I have reviewed all the safety rules and received a grade of 100% on the Laboratory Safety Quiz. I understand that maintaining a safe environment is essential to prevent accidents that may cause bodily harm to myself, my classmates, and my instructor.

(Student signature)

(Date)

(Parent signature)
(Date)



Name: _____ Date: _____ Group: _____

PROCESS SKILLS PRIMER

Use of Contact Lenses in the Laboratory

Parent or Guardian,

The use of contact lenses in a school laboratory poses some potential hazards. If a chemical accidentally comes in contact with the eye, the contact lens may hold the chemical against the surface of the eye and prevent thorough washing. If the time used to remove the contact lens prevents immediate washing of the eye, the chemical may have time to cause more damage to the eye. Chemical fumes can concentrate under the contact lens and cause damage to the eye surface. Use of chemical splash goggles at all times while conducting laboratory or field investigations can prevent most of the hazards mentioned above.

Please check the boxes below in regards to your son or daughter's choice about wearing contacts in the laboratory.

- My child does not wear contact lenses and will wear chemical splash goggles at all times during laboratory or field investigations.
- My child does wear contact lenses and will wear chemical splash goggles at all times during laboratory or field investigations.
- My child does wear contact lenses and will remove them before the laboratory investigation and wear glasses with chemical splash goggles at all times during laboratory or field investigations.

 (Parent or Guardian signature)

 (Date)