

Name: _____ Period: _____ Date: _____

Food Science Lab Safety Contract

I have read and clearly understand all of the laboratory safety rules. I recognize that it is my responsibility to keep the lab work area safe and clean. By signing this form I agree to the following:

- Read carefully all of the instructions and procedures for each assignment in the food science lab.
- Follow the instructions of the teacher for conducting the lab experiment.
- Practice all of the rules and procedures for personal hygiene and safety while working in the food science lab, including:
 - washing my hands before and after each lab experience
 - wearing an apron or a lab coat for all procedures
 - wearing closed toe shoes
 - wearing safety goggles when instructed by my teacher
- Learn how to use the fire extinguisher and first aid supplies.
- Behave responsibly while working in the food science lab for the safety of myself and others.

X

X

Student name:

Date:

X

X

Parent or guardian signature:

Date: