## **Student Safety Form**

PRINT	T NAME: Cla	nss:
1.	I have been shown the nearest fire pull, evacuation routes and the locations of the tornado shelters.	
2.	I have been shown the nearest safety show to use these devices properly.	shower and eye wash station and I have been told
3.	I have been shown the locations of the their protection and limitations.	personal protective equipment and I am aware of
4.	I have informed the T.A. or course instr cause difficulty while performing labora	uctor of any health conditions I have that may tory operations.
5.		that covers my arms, legs and the trunk of my at cover my entire foot therefore I will not wear ing in the laboratory.
6.	I agree to wear eye protection that has	been approved by the University.
7.		ring the laboratory session, regardless of how reporting these incidents, better safety practices
8.		acles are stored and I understand how to use the perly discard sharps, glass and biohazards.
9.	I will not work in the laboratory alone ar present.	nd I will not begin laboratory work until the T.A. is
10.		cedure before class. I can then anticipate any nem. I will not undertake any experimentation al procedure.
11.	I. I will not eat, drink, use tobacco, apply	cosmetics or chew gum during laboratory.
12.	2. I understand the chemical warning syst	ems and I am able to recognize hazard symbols.
13.		ibility of Material Safety Data Sheets and the the lab safety plan. I may request to see these
14.	I. I understand that any safety deficiencie	s I see in the lab should be reported to the T.A.
15.		usly listed safety rules. By signing this document I nted to me and I agree to follow these rules.

Signature \_\_\_\_\_\_Date\_\_\_/\_\_/