



Name \_\_\_\_\_

Date \_\_\_\_\_ Period \_\_\_\_

### LAB AND CLASSROOM SAFETY CONTRACT

\_\_\_\_\_ WHO IS ENROLLED IN THE RAMP-UP WITH STEM PROGRAM, WILL AS A PART OF HIS OR HER SHOP EXPERIENCE, OPERATE BOTH HAND TOOLS AND POWER TOOLS AND ANY SHOP EQUIPMENT NEEDED TO COMPLETE A JOB, PROVIDING THAT HIS OR HER PARENT OR GUARDIAN GIVES WRITTEN PERMISSION, IF APPLICABLE. I DO HEREBY PROMISE TO ABIDE BY THE FOLLOWING RULES. I UNDERSTAND THE RULES ARE IN PLACE TO KEEP MY FELLOW STUDENTS AND MYSELF SAFE IN THE LAB AND CLASSROOM. I ALSO UNDERSTAND THAT IF I VIOLATE THE RULES THERE WILL BE A CONSEQUENCE FOR MY ACTION THAT COULD RESULT IN MY REMOVAL FROM WORKING IN THE LAB. I UNDERSTAND THAT IF THIS HAPPENS I WILL HAVE TO DO AN ALTERNATE ASSIGNMENT IN ORDER TO EARN MY GRADE.

IT IS UNDERSTOOD THAT EACH STUDENT WILL BE GIVEN PROPER INSTRUCTION BOTH IN THE USE OF THE EQUIPMENT AND IN CORRECT SAFETY PROCEDURES CONCERNING IT, BEFORE BEING ALLOWED TO OPERATE IT HIMSELF OR HERSELF. THE STUDENT MUST ASSUME FULL RESPONSIBILITY FOR THE FOLLOWING SAFE PRACTICES, AND WE THEREFORE ASK HE OR SHE TO SUBSCRIBE TO THE FOLLOWING:

1. TO FOLLOW ALL SAFETY RULES FOR THE SHOP AND CLASSROOM THE FIRST TIME.
2. NEVER TO USE A PIECE OF EQUIPMENT WITHOUT FIRST HAVING PERMISSION FROM THE INSTRUCTOR.
3. NOT TO ASK PERMISSION TO USE A PARTICULAR PIECE OF EQUIPMENT UNLESS THEY HAVE BEEN INSTRUCTED IN ITS USE, AND HAVE 100% ON THE SAFETY TEST FOR THAT EQUIPMENT.
4. TO REPORT ANY ACCIDENT OR INJURY TO THE TEACHER IMMEDIATELY.
5. SAFETY GLASSES MUST BE WORN AT ALL TIMES IF ANY ONE PERSON IS WORKING IN THE LAB.
6. SAFETY INSTRUCTION AND TEACHER APPROVAL REQUIRED BEFORE OPERATING ANY MACHINE OR TOOL IN THE LAB.
7. LONG HAIR AND LOOSE CLOTHING NEED TO BE SECURED BEFORE OPERATING ANY MACHINE.
8. ALL GUARDS AND OTHER SAFETY EQUIPMENT MUST BE IN PLACE BEFORE OPERATING ANY MACHINE.
9. STAND TO ONE SIDE OF THE BLADE NEVER DIRECTLY IN FRONT OF IT. KEEP FINGERS AWAY FROM ALL BLADES.
10. MAKE ALL ADJUSTMENTS AND MEASUREMENTS BEFORE TURNING THE MACHINE ON.
11. DO NOT TALK TO OR BOTHER MACHINE OPERATOR.
12. **HORSEPLAY IS NEVER ALLOWED.**
13. TOOLS SHOULD BE IN GOOD CONDITION, USED CORRECTLY, AND STORED PROPERLY.
14. KEEP SOLVENT RAGS, PAINTS, COATINGS AND OTHER FLAMMABLE MATERIALS IN APPROVE METAL CONTAINERS.
15. CHECK WITH THE TEACHER BEFORE USING MATERIALS TOOLS OR MACHINES THAT DO NOT APPEAR IN GOOD WORKING ORDER.
16. KEEP ISLES CLEAR OF ALL TOOLS, MATERIALS, STOOLS, ETC, AND DO NOT RUN.
17. KNOW THE LOCATION AND PROPER PROCEDURES OF ALL SAFETY EQUIPMENT (EYE WASH, FIRE BLANKET FIRE EXTINGUISHERS, AND SAFETY SHUT OFF SWITCHES)
18. NOTHING IS EVER TO BE THROWN IN THE LAB INCLUDING PAPER AND TRASH
19. FOLLOW ALL INSTRUCTIONS AND DIRECTIONS THE FIRST TIME.

I/WE HAVE READ THE SAFETY CONTRACT WITH OUR SON/DAUGHTER. WE ALL UNDERSTAND THAT THE CONSEQUENCE FOR ANY VIOLATION IS A DECISION THE TEACHER AND DISTRICT 227 WILL MAKE BASED ON THE SEVERITY OF THE INFRACTION.

STUDENT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ TEACHER \_\_\_\_\_

I HEREBY GIVE MY CONSENT TO ALLOW MY SON/DAUGHTER TO OPERATE ALL TOOLS AND EQUIPMENT NECESSARY IN CARRYING OUT THE REQUIREMENTS OF THE COURSE IN WHICH HE OR SHE IS ENROLLED AS WELL AS DURING EXTRA CURRICULAR ACTIVITIES WHEN APPLICABLE.

PARENT'S SIGNATURE: \_\_\_\_\_ (IF APPLICABLE) DATE: \_\_\_\_\_

CONTACT # \_\_\_\_\_ CONTACT EMAIL \_\_\_\_\_