SAFETY INSTRUCTIONS FOR STUDENTS - PPE

You must wear PERSONAL PROTECTIVE EQUIPMENT (PPE): SAFETY GOGGLES and FLAME RESISTANT LAB COATS at all times when in the lab space. It is a legal requirement of the Commonwealth of Pennsylvania that eye protection be worn in university teaching and research laboratories. FOR YOUR SAFETY, the Department of Chemistry Safety Committee has issued the following rules for the Undergraduate Teaching Labs.

ALL STUDENTS, TEACHING ASSISTANTS, AND INSTRUCTORS ARE REQUIRED TO WEAR APPROVED SAFETY EYEWEAR and LAB COATS AT ALL TIMES WHEN IN THE LAB SPACE.
THERE ARE NO EXCEPTIONS.
Snugly fitting splash proof safety goggles are required. Do not wear contact lenses even with safety goggles.

Buttoned up lab coats provide the best protection, use all buttons to close the lab coat. Flame resistant lab coats are required.

DO NOT WEAR GLOVES, OR APRONS OUTSIDE OF THE LAB.
DO NOT WEAR LAB COATS OUTSIDE OF THE LAB FLOOR DOORS.

Food and Drinks are NOT permitted in the Organic Lab Hallway or anywhere inside the Organic Lab at any time. Observe and follow all posted safety signs.

Any undergraduate student not in compliance with these rules will first receive a verbal warning from the laboratory instructor. After a second offense on that day, the lab instructor will deduct 50% of the grade for the lab assignment associated with that day’s lab. Any student receiving a third warning during the same period of lab will be dismissed from that lab and will receive a grade of zero for the associated assignment and the lab coordinator will be informed. Any student dismissed from a second laboratory that semester for violation of the PPE safety policy will meet with the lab coordinator to determine if additional action, such as a grade of F for the lab course or dismissal from the course, is appropriate. Any additional violations of this policy or other safety procedures will result in a grade of F for the course.

STUDENT NAME (PRINT) _______________________________________

STUDENT SIGNATURE _________________________________________

DATE ________________________________