

(First semester)

**Lab Safety Certification
and Identification**

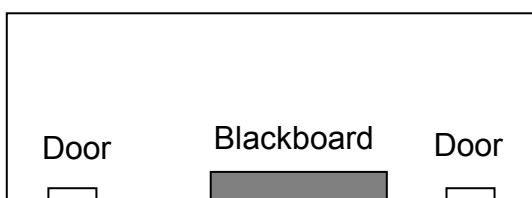


1. During the lab session, I will wear safety goggles to protect my eyes and will not wear contact lenses.
2. During the lab session, I will wear laboratory coat and trousers. I will wear shoes that protect the entire foot and will not wear slippers or sandals.
3. I shall follow the safety rules and regulations in the lab.

I have read and understood the rules listed above.

Indicate the location of the following items in the lab:

- (A) Fire extinguisher; (B) Fire blanket; (C) Eye wash fountain & safety shower;
(D) First aid kit; (E) Chemical absorbent; (F) Fume hood



Signature: _____ Cell: _____
Student ID: _____ Group No.: _____
Dept: _____ Date: _____
Emergency Contact: _____
Telephone: _____

(Second semester)

**Lab Safety Certification
and Identification**

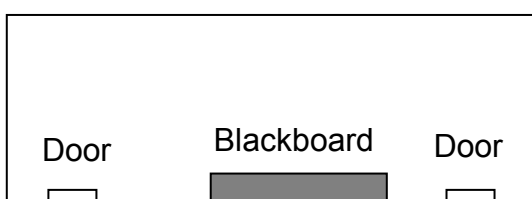


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