Science Safety Audit

Instructor & Class Information

| Instructor Name: | Date of Physical Review: |
|-------------------------------------|-------------------------------------|
| School: | Room Number: |
| Class Period: | Class Title: |
| Number of Students on Roster: | Average # of Student in Attendance: |
| Do Students Reseive Lab Credit: Ves | |

Do Students Receive Lab Credit: Yes

Names and positions of any other adults in the room during class time

Name: Position:
Name: Position:

Classroom Description

What is the maximum number of seats that can be accommodated in the classroom?

Is there any fixed furniture in the classroom? Yes

Is there a shower and eyewash station in the classroom? Yes

How many exits are there from the classroom?

Are outlets required for specialized equipment during any activities? Yes How many activities?

Does the room have sinks? Yes

Use of Space (to be completed by instructor)

Is there enough space for each student to participate safely in the activities required? Yes

Do students conduct labs that involve heat, glass, or chemicals? Yes How many labs?

Are there adequate methods of communication in case of emergency? Yes

Is it possible for the teacher to observe all student activity in this setting? Yes

Can all students get to the eyewash or shower in fewer than 5 seconds (if applicable)? Yes

Is there enough equipment for all students to participate? Yes

Response Questions for Instructor

What other issues need to be addressed to improve the safety of this space?

What concerns does the instructor have?

Continues on back

Science Safety Audit

Response Questions for Building Administrator

Instructor:

VEA Representative:

What issues need to be addressed to improve the safety of this space?

What recommendations does the administrator have to resolve any safety concerns?

Response Questions for VEA Representative

What issues need to be addressed to improve the safety of this space?

What recommendations does the VEA Representative have to resolve any safety concerns?

After the safety audit review, please sign and indicate whether or not this space, in your opinion, meets or does not meet safety requirements for the class that has been assigned to this space.

Building Administrator:

Pass safety review Fail Safety Review
Pass safety review Fail Safety Review