Fire Science Laboratory
Safety Observer Sign-up Sheet

The goal of this Safety Observer Sign-up Sheet is to insure that a person acting as a “second” person in the lab for purposes of meeting the “no working alone” rule has reviewed the Fire Science Laboratory Safety Guidelines.

Observer Name: ____________________________________________

Student Name: ____________________________________________

Experiment Name and Number: ____________________________________________

Hazards Identified:_______________________________________________________
______________________________________________________________________
______________________________________________________________________

Precautions to be understood by all involved:
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

__________________________________ _________________________
Advisor, Faculty Coordinator or Lab Staff Date

I have read and will observe the Fire Science Laboratory Safety Guidelines. I am familiar with the hazards involved and feel comfortable with my responsibilities in the Fire Science Laboratory. I will ask the students’ advisor, the lab staff or the Faculty Coordinator if I am unsure about anything in the Fire Science Laboratory.

__________________________________ _________________________
Safety Observer Signature Date