**TUSCULUM UNIVERSITY**

**DEPARTMENT OF NATURAL SCIENCES**

**Student Statement of Understanding and Agreement**

I agree to comply with all written and safety information, procedures, and precautions given by the instructor or designee. All questions I may have had have been answered to my satisfaction. Further, I understand failure to observe these guidelines could result in my dismissal from this laboratory course.

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| **Signature – I have read and understand the safety rules for Tusculum University’s College of Science, Technology, and Math** |
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**Course:**

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**Professor’s Signature:**

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**Received: \_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**