



Windsor-Essex Catholic District School Board

ST. THOMAS OF VILLANOVA CATHOLIC HIGH SCHOOL STUDENT SAFETY RULES

**Personal safety is a concern of everyone within the Catholic School Board.
The purpose of these rules is to establish uniform safety procedures throughout the Board.**

1. STUDENT CONDUCT

- a. The student must practice strict obedience at all times to rules, regulations and/or procedures as outlined by the teacher.
- b. The student must not operate or use equipment without first having received instructions on the safe operation from the teacher.
- c. Common sense must be used. Do not distract others while they are operating a power tool or machine.
- d. Accidents usually result because of an unsafe act. When students conduct themselves in a safe manner, accidents will not likely happen.
- e. The throwing of an object, running, or any form of undisciplined conduct or horseplay is forbidden in all areas. A student's conduct must reflect good safety habits at all times.
- f. The student must report to the teacher when he or she is under the influence of prescribed or unprescribed drugs. All allergies or physical disabilities which may affect the student's performance must also be reported to the teacher (fill out sheet on back page.)

2. SAFETY RULES – SPECIAL AREAS

- a. The student will demonstrate the safe work rules and practices for certain areas and/or equipment as the need arises.
- b. Disposable butane lighter must not be in the possession of a student when in any area where open flames, sparks and/or intense heat occurs.

STUDENTS, AFTER READING THIS PAGE KEEP IT IN YOUR NOTEBOOK.

3. DEMONSTRATION AND FOLLOW-UP

- a. The student must follow the procedures identified by the instructor/handouts and demonstrate the safe use of the equipment. If there is anything not fully understood, ask for assistance from the teacher.

4. PROTECTIVE CLOTHING

- a. The student must wear protective and proper clothing as determined by the operation being performed. Such items include eye protectors, hearing protection, safety goggles, face shields, aprons, etc. Proper footwear must be worn – (no winter boots, wet or muddy shoes, open toed shoes, or sandals.)

5. HOUSEKEEPING

- a. A clean uncluttered area is necessary for a good work/learning atmosphere. Each student should be on the lookout for hazards. Clean your work area as often as is necessary but at least before leaving.

6. SAFETY DEVICES

- a. Know the purpose and operation of all safety devices. Be sure you know their location (i.e. Emergency power shut offs), and if not operational, do not use the equipment. Report the hazard to the teacher immediately.

7. SAFETY RESPONSIBILITY

- a. You, the student, must share in the responsibility for your own safety, even though the Board goes to great effort to protect you.
- b. The student should report to the teacher when a tool or machine is not functioning properly, or when there is a condition that jeopardizes safety. Watch for and listen for signals, which would indicate a machine or equipment is malfunctioning.

8. REPORT INJURIES

- a. Report even the slightest injury whether or not you feel medical attention is necessary.

Student Signature: _____

Print Student Name: _____

The above are just general safety procedures. Specific safety procedures will be presented throughout the course of learning.

STUDENTS, AFTER READING AND COMPLETING THIS PAGE KEEP IT IN YOUR NOTEBOOK.



Windsor-Essex Catholic District School Board

ST. THOMAS OF VILLANOVA CATHOLIC HIGH SCHOOL STUDENT SAFETY RULES

1. I have read and understand these general procedures and rules of safe work.
2. I recognize that these rules are established for my protection and realize the importance of observing them in the interest of my own safety, and as well as the safety of others.
3. This program is designed to prepare you for furthering education in the field of study or working world. All project documentation must be accurate and complete prior to beginning procedures.
4. My signature is evidence that I have read and understand the safety rules as noted.

DATE _____

STUDENT SIGNATURE _____

Print Student Name _____

PARENT/GUARDIAN SIGNATURE _____

Print Parent/Guardian Name: _____

HOME ADDRESS _____

HOME TELEPHONE NO. _____

WORKPLACE:

FATHER'S _____

TELEPHONE NO. _____

MOTHER'S _____

TELEPHONE NO. _____

GUARDIAN'S _____

TELEPHONE NO. _____

Please list any physical disabilities or allergies which the teacher should be aware of:

AFTER COMPLETING THIS PAGE RETURN IT TO YOUR INSTRUCTOR AS REQUESTED.