

CONTRACTOR HSSE MANAGEMENT

Contractor Short Service Employee (SSE) Form (formerly Attachment I)
Owner: Stacey Kelley

Non-Mandatory
Restricted

The Contractor must complete and submit this form to the Shell UA location supervisor for approval prior to arrival on location. The Shell UA location supervisor must approve individual SSE before he/she arrives on location or in order to be removed from SSE status.

Contractor Co. Name: _____ Request Date: _____

SSE Name: _____

Date of Employment: _____ Years Oil field Exp.: _____

Current Job Title: _____ Experience in Present Position: _____ Yrs _____ Mos _____

Employment Record: (Last 3 years - Please explain gaps between employment)

Previous Employer(s)	Start Date	Departure Date

- Is this employee trained to safely perform this job? Yes No
- Is this employee in compliance with your Substance Abuse Program? Yes No
- Review of Shell UA's and Contractor's HSE Policy with SSE?
By Whom? Yes No
- Who has been assigned as the SSE mentor?
- List all of the training you provided for the SSE: _____ List Previous special training: _____

Signature of SSE employee being submitted (optional): _____

SSE Review and Approval:

Contractor's Management Date: _____

Shell UA Location Supervisor Date: _____

Removal from SSE Program:

Contractor's Management Date: _____

Shell UA Location Supervisor Date: _____

Justification for early removal from SSE Program:

Area Team Leader (ATL) Notification Concurrence Yes No ATL Name _____