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| I understand that **Petroleum Deepwater (Woodside Energy Limited)** (the “Company”) has a Drug and Alcohol Management Procedure (the Procedure) to ensure that individuals on Company Sites or working on behalf of the Company are free of the hazards that drugs and alcohol may present. |

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| **Applicants** | I understand that I have been given a conditional offer of employment, and that prior to being employed by the Company I will be tested for drugs and/or alcohol. I understand that a confirmed positive test will result in me not being hired by the Company. I acknowledge that if I am hired, my compliance with the Procedure is mandatory and that I will be subject to drug and alcohol testing while employed by the Company. |

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| **Employees and Contractors** | I understand that compliance with the Procedure is mandatory and that a violation of the Procedure, including a confirmed positive test, may result in my removal from Company Sites and/or disciplinary action by my employer (subject to applicable laws and regulations). I understand that the Procedure is available on the Company's Digital Workspace. |

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| I am aware that the Company will conduct urinalyses, breath analyzer/evidential breath testing (EBT), hair screening, or oral fluid tests for the purpose of determining if I am in violation of the Procedure. These tests may be used in the following situations:   |  |  | | --- | --- | | (a) Pre-employment (applicants)  (b) Random  (c) Reasonable Suspicion | (d) Post-incident  (e) Sweeps, and  (f) Follow-up testing that is consistent with the enforcement of the Procedure. |   I understand that unannounced searches may be conducted of my person, vehicle, or personal property to determine if I am in violation of the Procedure, or to ensure that the workplace is free of other hazards. I authorize the Company, or its designated representative, to conduct any such search. |

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| **Consent** | | | | |
| I give my consent to the Company and/or its designated representative to collect breath, urine, hair, blood, or similar specimen for screening and testing for the purpose of determining the presence of drugs and alcohol. I also give my consent to the Company and/or its designated representative to conduct a urinalysis, breath analyzer, or other tests for the purpose of determining if I am in violation of the Procedure. I authorize the results of my tests to be released to the Company (as well as to my employer in the case of contractors), for the purpose of determining if I am in violation of the Procedure. I understand that this consent shall remain in effect for so long as I am employed by or providing services to the Company, unless revoked by me in writing and delivered to the Company. I further agree that a reproduced copy of this consent form shall have the same force and effect as the original. | | | | |
| Individual's Printed Name: |  | | Date: | |
| Individual's Signature: |  | Employer: | |  |
| Witness Printed Name: |  | | Date: | |
| Witness Signature: |  | Employer: | |  |