

Offshore Oil Rig Crew Safety Assessment

General Information

Date of Assessment

Assessor Name

Rig/Platform Name

Crew Shift/Team

Crew Member Details

Name	Role	ID	Years of Experience	Medical Clearance

Safety Equipment Check

Equipment	Status	Remarks
PPE (Helmet, Gloves, etc.)		
Life Jackets		
Emergency Escape Routes		
First Aid Kits		

Training & Certification

Recent Safety Training Completed

Certifications Verified

Last Safety Drill Date

Observations

General Observations & Comments

Identified Hazards

Hazard Description	Risk Level	Action Required

Corrective Actions

Details of Corrective Actions Taken / To be Taken

Reviewer Name

Review Date