

PROCEDURE FOR ISSUANCE OF EMPLOYMENT CERTIFICATES

(WORK PERMIT - 14 & 15 YEAR OLDS)

1. A STATEMENT OF INTENTION TO EMPLOY...is required for the issuance of an Employment Certificate (work permit). This statement should be signed by the prospective employer or by someone duly authorized by him. It should be preferably on letterhead but plain note paper is acceptable. The statement should have the following information:
 - A. Description of specific occupation or duties.
 - B. Exact hours of day minor will be employed.
 - C. Number of hours per day minor will be employed.
 - D. Number of days per week minor will be employed.
2. PRINCIPAL'S STATEMENT...(Obtained from the principal of student's school)
This form is required for issuance of work permits when the work is performed outside of school hours or on Saturdays or on school holidays during the school term. It is not required during regular school summer vacation. It is signed by the principal of the school which the minor attends.
3. CERTIFICATE OF PHYSICAL FITNESS...A physical examination certificate must be presented when student is issued a work permit at the Regional Superintendent of School's Office. They may pick up a physical certificate from the issuing office or if they have had a **recent physical for school or sports**, a copy of it will be accepted. If the issuing officer has any doubts as to the physical well being of the minor, a new physical may be required.
4. PROOF OF AGE...A **Birth Certificate** is required for proof of age. It may be a copy. It does not have to be the original.

HOURS OF WORK

14 & 15 year old minors may not be employed:

- During school hours, except as provided for under the Work Experience & Career Exploration Program.
- Before 7 a.m. or after 7 p.m. except 9 p.m. from June 1 through Labor Day.
- More than 3 hours a day - on school days.
- More than 18 hours a week - in a school week.
- More than 8 hours a day - on nonschool days.
- More than 40 hours a week - in nonschool weeks.

APPLICATION FOR EMPLOYMENT CERTIFICATE

STUDENT'S NAME: _____

DATE OF BIRTH _____

ADDRESS: _____

CITY OF BIRTH _____

CITY: _____

SOCIAL SECURITY NO.: _____

COUNTY OF BIRTH _____

STUDENT'S PHONE NO.: _____

STATE OF BIRTH _____

SCHOOL: _____

PARENT/GUARDIAN NAME: _____

ADDRESS: _____ CITY: _____

Parent/Guardian Signature / Date

EMPLOYER'S STATEMENT

NAME OF COMPANY: _____

ADDRESS OF COMPANY: _____ CITY: _____

PHONE NO.: _____ NATURE OF BUSINESS: _____

Student's job title and a description of the work that the student will do: _____

Student will work _____ school days per week; _____ hours per school day.

Student will work _____ hours on Saturday and/or Sunday.

Are alcoholic beverages served? YES___ NO___

Is this summer work only? YES___ NO___

Signature of Company Official / Date

Title

STATEMENT OF PHYSICAL FITNESS

A physical statement signed by a physician within one year of application is required.