

PARENT/SCHOOL AUTHORIZATION FOR EMPLOYMENT OF A MINOR

This form, with copy of proof of age, is to be kept by the employer and be available for departmental audit.
 Attach copy of birth certificate or other proof of age document.

SECTION I – COMPLETED BY EMPLOYING DEPARTMENT				
Minor Last Name:		First Name:		Middle:
Minor's Address:		City:	State:	Zip:
Name of Minor's School:				
School's Address:		City:	State:	Zip:
Maximum Hours/Day at Work:	Maximum Working Days/Week:	Is Minor Employed at Any Other Job? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If employed, the minor will have the following duties:				
Working Hours: From to		Minor's Meal Period:	Minor's Rest Period:	Wage/Hour: \$
Department:		Department Box Number:		Department Phone: - -
Department Address:		City:	State:	Zip:
Signature of Minor: _____			Date _____	
Signature of Supervisor: _____			Date _____	

SECTION II – PARENTAL AUTHORIZATION			
<i>To be completed by minor's parent or guardian (after hiring department completes top section)</i>			
"I am willing for my child to be employed at the occupation and under the conditions stated above."			
Minor's Birthdate:	Sex:	Signature of Parent or Guardian: _____	Date: _____

SECTION III – SCHOOL AUTHORIZATION		
<i>To be completed by school official if minor will work during school year</i>		
"The hours of employment stated above meet the requirement of school attendance regulation and are hereby approved. The minor will attend school as follows:"		
School Grade Completed:	Hours/Day in School:	If minor is in work-experience program, please explain:
Date:	Phone:	
Title: _____		Signature of School Authority: _____