

REQUEST FOR WORK PERMIT APPLICATION

Return completed application to the Main Office along with:

- Copy of Birth Certificate
- Copy of Social Security Card
- Illinois Department of Labor Certificate of Physical Fitness Form
- State of Illinois Principal's Statement to Issuing Officer Form AFTER you have a job.
- A letter from the Employer stating they plan on employing the minor, which includes answers to the questions in the Employer/company Section.

Parent/Guardian Section

Minor's Name: _____

Complete Address: _____

Social Security Number: _____

Parent/Guardian Name: _____

Parent/Guardian Address (if different): _____

**My signature serves as permissions for the minor named above to work at the business shown below.*

Parent / Guardian Signature

Employer/Company Section (please also attach Letter of Intent to Hire from employer)

Company/Employer Name: _____

Complete Address: _____

Nature of Industry: _____

Job Description: _____

Is liquor served? _____ Is this summer work only? _____

Hours/Day: _____

OFFICE USE	___ Social Security Card	___ Birth Certificate	___ Physical Form	___ Principal's Form	___ Employer's Letter
------------	--------------------------	-----------------------	-------------------	----------------------	-----------------------

State Of Illinois, Department Of Labor

Principal's Statement To Issuing Officer

Required by Section 12 of the Child Labor Law, 820 ILCS 205/1-22

Date _____ Name of School _____

This is to certify that the undersigned has interviewed _____
residing at _____ and that
said minor requests that an employment certificate be issued permitting employment outside
of school hours.

The school records disclose that above-named minor was born _____ and has
completed the _____ Grade. He or she is in school from _____ AM to _____ PM
with _____ hour for lunch.

Parents' names are:

Father: _____ Mother _____

According to the school records, above-named minor is making satisfactory progress; therefore,
I recommend an employment certificate be issued for present employment.

Principal _____ By _____

MINOR, PLEASE NOTE: EMPLOYMENT CERTIFICATES ARE ISSUED BY CITY AND COUNTY
SUPERINTENDENTS OF SCHOOLS OR THEIR DULY AUTHORIZED AGENTS IN EACH SCHOOL DISTRICT.

NOTE: THIS IS NOT AN EMPLOYMENT CERTIFICATE BUT SHOULD BE DELIVERED TO THE ISSUING
OFFICER WHO WILL ISSUE NECESSARY CERTIFICATE AS REQUIRED BY LAW. THIS FORM MAY BE
REPRODUCED BY LOCAL SCHOOL AUTHORITIES AND ADDITIONAL INFORMATION ADDED IF NECESSARY
TO MEET LOCAL CONDITIONS.

State Of Illinois, Department Of Labor

Certificate Of Physical Fitness

Required by Section 12 of the Child Labor Law, 820 ILCS 205/1-22

Name _____ Date of Birth _____

Address _____

City _____ State _____ ZIP Code _____

Gender _____ Eye Color _____ Hair Color _____

Name of Employer _____

Address of Employer _____

City _____ State _____ ZIP Code _____

Description of Work Requested:

Remarks: (Physical Fitness for Requested Work):

Name of Examiner _____

Signature of Examiner _____

Date _____