

Work Permit Information

Attached is the following information:

1. Parent Permission Letter (to be completed by Parent or Legal Guardian)
2. Statement of Intention to Employ (to be completed by prospective employer)
3. Certificate of Physical Fitness (to be completed by a physician)

In order to obtain a work permit you must:

1. Bring all of the attached papers completely filled out.
2. Bring a copy of student's birth certificate.
3. Have a parent/guardian accompany student to meet with the Issuing Officer.

Paperwork submitted to the office after 1:30 pm will be processed the next business day.

**Parent/Guardian Permission Letter
for
Illinois State Employment Certificate**

Please fill out the following information:

Name of Minor: _____

Address of Minor: _____

City & State _____

Minor was born in:

City _____ State _____ Zip _____ County _____

Minor's Date of Birth: _____ Current Age _____ Current Grade _____

Birth Certificate Registration Number: _____

Child's Social Security Number: _____

Father's Name: _____

Mother's Name: _____

Parent/Guardian Address: _____

City & State: _____

A copy of birth certificate and the parent must accompany child when receiving the work permit.

My child, _____ has my permission to be employed

by _____.

Parent/Guardian Signature _____

Date _____

Statement of Intention to Employ

The following information is being provided for said minor to obtain an Employment Certificate from the State of Illinois so that he/she may be employed by the industry listed below.

Minor's Name: _____

Name of Work Establishment: _____

Address of Work Establishment: _____

Telephone Number of Work Establishment: _____

Nature of Industry: _____

Is Liquor Served? _____

Is this for Summer Work Only? _____

Occupation Title: _____

Duties of Minor: _____

Number of Hours Per Day Minor Will Work on School Days: _____

Number of Hours Per Day Minor Will Work on Days School is Not in Session: _____

Number of Days Per Week Minor Will Be Employed: _____

Signature of Prospective Employer: _____

Date: _____

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: _____

Sex: _____ Color of Eyes: _____ Color of Hair: _____

Name of Employer: _____

Address of Employer: _____

Description of Work Requested: _____

Remarks (Physical Fitness for Requested Work): _____

Name of Examiner Signature of Examiner Date