



## Employment Permit Application for 14 through 17 Year-Olds

**Instructions:** After completing the form and obtaining the required signatures as indicated, take this completed form to the Superintendent of Schools, or the person your school (including a charter school) has authorized to issue work permits, in the school district where you live or attend school. You should bring with you proof of your age, such as your birth certificate, passport, or immigration record. The Superintendent, or the person your school (including a charter school) has authorized to issue work permits, will then issue you an Employment Permit.

Bring the signed work permit back to your employer who must keep it until you leave the job.

Questions about this application should be directed to the Department of Labor Standards at (617) 626-6952.

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If you are under 18 years of age, you must obtain a work permit before starting a new job.<sup>1</sup> G.L. c. 149, §§86-89. The following are the steps you should take; **please note that a Physicians Certificate of Health is required only of 14 and 15 year-olds.**

### Steps for Getting an Employment Permit

1. Obtain a job offer from an employer.
2. Ask the employer to complete the following section:

#### Promise of Employment

Name of Minor:	
Name of Employer:	
Business Address:	
Job Title & Primary Duties:	
Number of Hours per day Minor is to be Employed:	
The undersigned agrees to employ this minor as stated above and in compliance with state law. <b>A summary of laws governing minors' hours of work and hazardous occupations can be found at the end of this application form.</b>	
_____ Signature of Employer or Authorized Agent	_____ Date

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<sup>1</sup> Minors who are 17 years of age, who can show documented proof of a high school diploma or the equivalent to the school official authorized to issue work permits, do not need a signed work permit, but must still complete this permit application.

NOTE: If the minor seeking an employment permit resides outside of Massachusetts, the minor should obtain a work permit from the superintendent of schools in the city/town in Massachusetts where the minor is to be employed.

3. **For 14 and 15 year-olds only (16 and 17 year-olds may skip this step):** Ask your doctor to complete the following section:

**Note:** The following Certificate of Health must be signed **within 12 months** of the date this application is presented to the school official issuing the permit.

### Physician's Certificate of Health

I hereby certify that I have made a thorough physical examination of the following named 14 or 15 year-old minor:

\_\_\_\_\_

and that, in my opinion, said minor is in sufficiently sound health and physically able to perform the work indicated above. **A summary of laws governing minors' hours of work and hazardous occupations can be found at the end of this application form.**

\_\_\_\_\_  
Signature of Physician

\_\_\_\_\_  
Date

4. Ask your parent, guardian, or custodian to sign below.

I hereby approve the issuance of a permit for the work indicated above. **A summary of laws governing minors' hours of work and hazardous occupations can be found at the end of this application form.**

\_\_\_\_\_  
Name of Parent, Guardian, or Custodian

\_\_\_\_\_  
Signature of Parent, Guardian, or Custodian

\_\_\_\_\_  
Date

5. Sign this application below:

\_\_\_\_\_  
Signature of Minor

\_\_\_\_\_  
Date

## Sturgis West Student Information Form

Please submit this form along with all of your completed Employment Permit Application documents. All 3 forms must be filled out and received by Ms. Solbo or Ms. McInerney at Sturgis West before permitting process can begin.

Allow adequate time for the process to be completed before your job is to start by submitting ALL 3 documents as soon as possible. Your permit will be available to pick up from Mrs. Hyer or Mrs. Chaprales upon completion.

Thank you for your cooperation.

STUDENT NAME: \_\_\_\_\_

STREET  
ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATE OF BIRTH: mm/dd/year \_\_\_\_ / \_\_\_\_ / \_\_\_\_

PLACE OF BIRTH: City \_\_\_\_\_, State \_\_\_\_\_

CURRENT AGE: \_\_\_\_\_ Years, \_\_\_\_\_ Months

GENDER: MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

COLOR OF HAIR: \_\_\_\_\_ COLOR OF EYES: \_\_\_\_\_

DISTINGUISHING FACIAL MARKS: \_\_\_\_\_

SCHOOL LAST ATTENDED: \_\_\_\_\_

LAST GRADE COMPLETED: \_\_\_\_\_

# YEARS IN SCHOOL (INCLUDING PRE-SCHOOL): \_\_\_\_\_

