

THE UNIVERSITY OF THE STATE OF NEW YORK
THE STATE EDUCATION DEPARTMENT
ALBANY, NEW YORK 12234

APPLICATION FOR EMPLOYMENT PERMIT

See reverse side of this form for information concerning employment of minors.

All signatures must be handwritten in ink, and applicant must appear in person before the certifying official.

PART I - Parental Consent - (To be completed by applicant and parent or guardian)

Date: _____

X I, _____ Age _____
[Signature of Applicant] [Social Security Number]

[Full Home Address including Zip Code]

, apply for a certificate as checked below:

- Newspaper Carrier Permit (See Part III below)
- Farmwork Permit
- Child Model Permit (See Part IV below)
- Farmwork Permit - Special
- Street Trades Permit

I hereby consent to the required medical examination and employment certification as indicated above.

X _____
[Signature of Parent or Guardian]

PART II - Evidence of Age - (To be completed by issuing official only)

X _____ Check evidence of age accepted - Document No. (if any) _____
[Date of Birth]

- Birth Certificate
- Schooling Record
- Other _____
[Specify]

PART III - Certificate of Physical Fitness

Applicant shall present a certificate of physical fitness from a school or private physician. Said examination must have been given with 12 months prior to issuance of the employment permit. A physical fitness certificate is not required for the issuance of a Newspaper Carrier Permit if the applicant is qualified to participate in the school's physical education program. If not qualified to participate, a physician's permission is required. Is the applicant in the school's physician education program?

- YES
- NO

PART IV - Schooling Record - (To be completed by school official) - Required only for Child Model Permit)

I certify that the records of _____
[Name of School] [Address]

show that _____
[Minor's Name] whose date of birth is _____

is in grade _____

[Signature of Principal or Designee]

PART V - Employment Certification

Permit Number: _____ Date issued: _____

[Issuing Center]

[Address]

[Signature of Issuing Official]