

Young Persons Employment

Written Consent of Parent or Guardian

Date of Consent: _____

Month Day Year

Dates of Work: From _____ To: _____

CHILD INFORMATION

Name of Child: _____

Surname

Given

Middle Initial

Date of Birth (M/D/Y): _____

Month Day Year

Address: _____

Unit Number

Street

City

Postal Code: _____

Phone: _____ Alternate Phone: _____

EMPLOYER INFORMATION

Name: _____

Work Location: _____

Contact Phone Numbers: _____

Hours: _____

PARENT/GUARDIAN DECLARATION

I _____ am the parent of this child. I am the legal guardian of this child.

Name (Please print in full)

This is my written consent for my child to be employed. I have read and am familiar with the Employment Standards Act & Regulation regarding the employment of young people.

I have noted the specifics of location, hours of work and type of work to be performed.

Signature: _____

Address (if different than child): _____

Phone (if different than child): _____

Alternate Phone: _____

This Written Consent along with proof of the child's age must be retained by the employer as part of the employment records. (Parent or guardian should retain a copy for own records).