## WEST VIRGINIA DIVISION OF LABOR

1900 Kanawha Boulevard East - State Capitol Complex – Building 3, Room 200 - Charleston, WV 25305 Email Address: WageandHour@wv.gov - Fax: (304)558-3797 - Telephone: (304)558-7890 Website: labor.wv.gov



## WORK PERMIT FOR A FOURTEEN (14) OR FIFTEEN (15) YEAR OLD MINOR Authorized by W. Va. Code §21-6-3, §21-6-4, §21-6-5, and §21-3-10a

SECTION A - To Be Completed by the Minor's Prospective Employer (Attach additional sheets if necessary)

1. I intend to employ jobs and to use the following tools or equip				
2. I will employ the minor beginning on	fc	or a maximum of	 fhours p	er week, as follows:
D	ate		# of hours	
	WORK SC	HEDULE		
☐ Employment While School is	in Session		□ Summer Em	ployment
Monday □am □pm <b>to</b> □a	am □pm	Tuesday	□am □pm <b>t</b> o	<b>)</b> □am □pm
Wednesday □am □pm <b>to</b> □a	am □pm	Thursday	□am □pm <b>to</b>	) □am □pm
Friday □am □pm <b>to</b> □a	am □pm	Saturday	□am □pm <b>t</b> o	<b>o</b> □am □pm
Sunday □am □pm <b>to</b> □a	ım □pm			
3				
Employ	yer's Business	Name and Address		
Employer's Busin	ness Telephon	e Number and Email A	Address	
4.				
Desc	cription of Em	ployer's Business		
By my signature below, I understand and e forth above or as modified in Section D bel 6-1 through §21-6-11, which includes proviminor works five (5) or more hours.	low, and a	s required by th	ne Child Labor A	ct, W. Va. Code §21-
I further acknowledge that I will keep this	Work Per	mit on file as lo	ng as the minor	is employed by me.
Printed Name and Signature of Employer or Emp	ployer's Autho	orized Representative	and Title	Date
Telephone Number and	d Email Addres	ss of Person Completin	ng this Section	

## SECTION B – To Be Completed by the Minor's Parent or Legal Guardian

I,	am the $\square$ parent or $\square$ legal guardian of
Printed Name of Parent or Legal Guardian	
	, born on
Full Legal Name of Minor	, born on Date of Birth
in	, and who is years old.
Town or City and State of Birth	
I have attached my child's $\hfill\Box$ Certified Birth Certificate or $\hfill\Box$	a Certified Copy of the Birth Certificate to this Work Permit.
By my signature below, I consent to the employment of my	child as described in Section A or as modified in Section D.
Signature of Minor's Parent or Legal Guardian	Date
SECTION C – To Be Completed by the Principal or Re	gistrar of the Minor's School *
I,Elissa Miller Printed Name of Principal or Registrar	
Morgantown High School I certify that	at
	Name of Minor's School Full Legal Name of Minor
is currently enrolled in or is attending this school.	
Signature of Principal or Registrar	Date
109 Wilson Avenue, Morgantown, WV	26501; 304-291-9260; elrmille@k12.wv.us

 ${\bf Address, Telephone\ Number,\ and\ Email\ Address\ of\ the\ Principal\ or\ Registrar}$ 

<sup>\*</sup>Section C may also be completed by the superintendent of schools or issuing officer when the minor is attending public school in the same county that the work permit is issued.

<sup>\*</sup> For homeschooled minors, Section C is completed by the individual, parent or guardian that is responsible for the minor's education.

SECTION D – To B	e Completed by the	e County Superintendent of Schools or Authorized Issuing Officer	
I,E	lissa Miller	, $\square$ am the Superintendent of Schools or $ imes$ the issuing office	er
Printed Name of Superin	tendent of Schools or Issui	ing Officer	
appointed by the	Superintendent o	of Schools for Monongalia County to review this Work Permit.	n
deciding whether	to issue, modify or	reject this Work Permit, I certify that I have reviewed Sections A,	Β,
and C and verified	the minor's age as	s evidenced by a certified birth certificate or a certified copy of th	ıe
birth certificate.			
By my signature be	low, I am □issuing □I	modifying or □rejecting this Work Permit, effective	_•
		Date	
The modifications	, if any, are as follow	vs:	_
			_
The reason(s), if a	ny, for rejecting this	s Work Permit are as follows:	_
			_
			_
Signature of Superin	tendent of Schools or Issui	ing Officer Date	
109	) Wilson Avenue, M	Norgantown, WV 26501; 304-291-9260; elrmille@k12.wv.us	_
	Address, Telephone N	lumber, and Email Address of the Superintendent of Schools or Issuing Officer	
Original Work Per	mit must be retain	ned by the Superintendent of Schools or Issuing Officer.	
• •		d or $\times$ emailed to the West Virginia Division of Labor to the email within four (4) days of issuance as required by W. Va. Code §21-6-	
Copies mailed to	the Minor's × Par	ent or □Legal Guardian and the Minor's <u>×</u> Employer.	