

# WORK PERMIT DATA SHEET

(For Collection of Information ONLY)

<b>A</b>	<b>Information on Minor</b> (Please Print)
Name _____ <div style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <span>Last</span> <span>First</span> <span>MI</span> </div>	
Street _____ City, State, Zip Code _____	
County _____ Parent / Guardian's Name _____ <div style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <span>Last</span> <span>First</span> <span>MI</span> </div>	
Date of Birth _____ Age _____ Race _____ Gender _____ <div style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <span>Month</span> <span>Day</span> <span>Year</span> </div>	
SSN / Parent Alien Certification Number _____ Home Phone Number ( _____ )	
Is minor a GA student? _____ If so, School of Attendance & Grade _____	
<b>You must present a Birth Certificate to the Issuing Officer.</b>	

<b>B</b>	<b>Employer Information</b> (Please Print)
For employer internet access go to <a href="http://www.dol.state.ga.us">www.dol.state.ga.us</a> , select Child Labor, then select Online Work Permit	
Name of Employer _____	
Physical Address _____	
City _____ State _____ Zip Code _____ County _____	
Phone No. _____ Type of Industry _____	
Job Duties: _____	
# <input type="checkbox"/> Enter maximum hours per school day.	Hours will be scheduled between _____ : AM / PM _____ : AM / PM <div style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <span>Earliest Start Time</span> <span>Latest End Time</span> </div>
# <input type="checkbox"/> Enter maximum hours per non-school-day.	Hours will be scheduled between _____ : AM / PM _____ : AM / PM <div style="display: flex; justify-content: space-between; width: 80%; margin: 0 auto;"> <span>Earliest Start Time</span> <span>Latest End Time</span> </div>
# <input type="checkbox"/> Enter maximum hours per week when school in session.	
# <input type="checkbox"/> Enter maximum hours per week when school not in session.	
<b># Each box requires a number</b>	
Printed Name and Title of Employer providing Information _____	Signature _____ Date _____

**THIS IS NOT AN EMPLOYMENT CERTIFICATE.**

This form is used for obtaining information for the issuance of electronic work permits. Minor completes Section A. Employer completes Section B **in its entirety**. Issuing Officer enters all data into online work permit system. After proper issuance of the electronic work permit by a school official, a printed copy of the completed work permit will be furnished to the minor for submittal to the employer prior to employment. The employer must retain the completed work permit for the duration of the minor's employment. If you have any questions, please contact the Department of Labor, Child Labor Section at 404-232-3260.

**\* All Fields Required**

NOTE: When there is a difference in law (federal, state, and/or local) the law providing the most protection to the minor takes precedence.  
 Equal Opportunity Employer/Program \* Auxiliary Aids & Services Are Available Upon Request To Individuals With Disabilities