

(CHILD & YOUNG PERSONS ACT 1933 AS AMENDED BY THE CHILDREN ACT 1989 AND LOCAL AUTHORITY BYLAWS)

WORK PERMIT APPLICATION FORM

PLEASE RETURN COMPLETED FORM TO:

CHILD EMPLOYMENT TEAM CHILDRENS SERVICES P.O. BOX 734 WINCHESTER SO 23 5DG

TEL: 020 7926 9503/0207 926 9610 EMAIL: childemploymentteam@lambeth.gov.uk Please attach <u>two</u> original passport photographs taken within the last six months.

Please do not glue or tape, these photographs will be attached to the work permit

PLEASE FILL OUT THIS FORM USING BLOCK CAPITALS

| PART ONE: TO BE COMPLETED BY EMPLOYER | | | | |
|---|-------|----------|---------------------------------|--|
| I hereby give notice that I intend to employ the child whose details appear below | | | | |
| Full Name of Child | | | Date of d d m m y y y y y Sirth | |
| Full Name of Employer | Title | Forename | Surname | |
| Trading As | | | | |
| Address of Employer | | | | |
| Telephone Number of Employer | | | | |
| Email Address of Employer | | | | |
| Nature of Business | | | | |
| Nature of Work proposed | | | | |
| Address where child will be employed (if different from above) | | | | |
| Start Date | | | | |

RESTRICTIONS OF EMPLOYMENT OF CHILDREN AGED 13 AND OVER

No child may be employed under 13 years of age.

The bylaws apply to any child of 13 years until the date when he or she is no longer legally obliged to receive education

For Year 11 pupils there is now only one school leaving age which is the last Friday in June each year. This is known as the Mandatory School Leaving Age (MSLA) in the UK. Children up to the MSLA can only be employed if they have been issued with an Employment Permit

When the Department for Work & Pensions (DWP) have issued a National Insurance number, this should not be taken to imply that the child is then eligible to work full time

No child may be absent from school for the purpose of employment

If a child helps with any business which is carried out for profit, even if they receive no payment, they are still deemed to be employed. Employer must check that the child's date of birth is accurate.

On school days, children may work between 0700 and 0800hrs and from the end of the school day until 1900hrs. They can work for a maximum of 2 hours on a school day. They can work for a maximum of 12 hours per week

On Saturdays and during school holidays, children can be employed between the hours of 0700 and 1900hrs. Children under the age of 15 years can work for a maximum of 5 hours per day (25 hours per week). Children aged 15+ can work for a maximum of 8 hours

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|---|---|--|--|
| | per day (35 hours per week). | | |
| | On Sundays, child can only be employed between 0700 and 1000hrs for a maximum of 2 hours | | |

| Proposed Employment Timetable Please refer to the restriction shown on page 1 | | | | | | |
|--|-------|----------------|-------|-----------------|--------|-------|
| | Se | chool Term Tir | ne | School Holidays | | |
| | Start | Finish | Hours | Start | Finish | Hours |
| Monday | | | | | | |
| Tuesday | | | | | | |
| Wednesday | | | | | | |
| Thursday | | | | | | |
| Friday | | | | | | |
| Saturday | | | | | | |
| Sunday | | | | | | |

With the above daily limits, a child's weekly total of working hours may not exceed 25 per week or 35 per week if 15 years of age or over.

DECLARATION TO BE SIGNED BY THE EMPLOYER

I understand that a child employment permit, if granted, would:

Not give any authority to employ the said child except within accordance to any Enactment, Regulation or Bylaw relating to the employment of children of compulsory school age

Only permit the child to be employed for the times and category of employment referred to in this application Not be transferable, either to any other type or class of employment, or to any other child

I hereby declare that to the best of my knowledge, the above information is true. I have completed a risk assessment and notified the child's parent/guardian of any risks associated in respect of his/her employment, and what steps I shall be taking to reduce them. I understand that I would be liable to prosecution if I wilfully stated in this application anything which I know to be false or did not believe to be true, or if I employed the child in breach of any enactment, regulation or bylaw relating to the employment of children of compulsory school age.

| SIGNED | |
|---------------------|--|
| PRINT NAME | |
| DATE | |
| POSITION IN COMPANY | |
| COMPANY | |

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(CHILD & YOUNG PERSONS ACT 1933 AS AMENDED BY THE CHILDREN ACT 1989 AND LOCAL AUTHORITY BYLAWS)

| | PART TWO: TO BE COMPLETED BY THE PARENT OF THE CHILD (SEE NOTE 2 BELOW) | | |
|--|---|--|--|
| | | | |
| Full Name of Child | Date of Birth d d m m y y y y | | |
| Child's Address | | | |
| | | | |
| December 1 | | | |
| Parent Telephone numb | er: | | |
| Parent Email Address | | | |
| Details of any ailments of | | | |
| illnesses and treatments | | | |
| that the child has had ov | /er | | |
| the past twelve months: | | | |
| (see note 3 below) | | | |
| | DECLARATION TO BE SIGNED BY THE PARENT | | |
| | | | |
| I support the application for a child employment permit in respect of my child named above, I hereby declare that to the best of my knowledge, that the above information is true. I understand that I would be liable to prosecution if I wilfully stated in this application anything which I know to be false or did not believe to be true or if it led to the employment of my child in breach of any enactment, regulation or bylaw relating to the employment of children of compulsory school age. | | | |
| SIGNED | | | |
| PRINT NAME | | | |
| DATE | | | |
| RELATIONSHIP TO CHILD | | | |
| | | | |

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(CHILD & YOUNG PERSONS ACT 1933 AS AMENDED BY THE CHILDREN ACT 1989 AND LOCAL AUTHORITY BYLAWS)

| PART THREE: TO BE COMPLETED BY THE SCHOOL | | |
|---|--|--|
| | | |
| School Name and Address | | |
| School Email Address | | |
| School Telephone Number | | |
| I declare that the child | | |
| SIGNED | | |
| PRINT NAME | | |
| DATE | | |
| Position in School | | |

Notes:

- 1. This form is to be returned to the Local Authority (LA) in whose area the child will be employed (please return to childemploymentteam@lambeth.gov.uk)
- 2. 'Parent' in relation to a child or young person includes any person a) who is not a parent of his but who has parental responsibility or b) who has care of him
- 3. On receipt of this application form by the LEA a medical certificate may be sought from the Area Health Trust or the child's general practitioner. There may be a charge for this service however; the LEA accepts no liability for any such payment.

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