

Division of Labor Standards Harriman State Office Campus Albany, NY 12226 www.labor.ny.gov

Parent/Guardian Statement of Consent

I certify that I am the parent or	guardian of:			
Full name of minor	 -	Minor's date of birth	Minor's Social Security Number	
	Address – inc	clude city and zip code		
In accordance with Section 143 of 16 and 17-year olds, permis the hours of 10:00 PM and 12: session, at the following place	sion is granted fo 00 midnight, not t	r the employment of th	e above named minor between	
		FEIN#		
Name of business			FEIN#Federal Employer Identification Number	
Addres I understand that this consent revoking it.		be employed – include city and zi		
Signature of parent or guardian			Date	
Sworn before me this	day of		, 20	
Signature – Notary Stamp				

ATTENTION EMPLOYERS

- 1- This consent must be maintained at the place of employment and presented to a representative of the Department of Labor upon request. Failure to do so at the time of inspection will be considered prima facie evidence of a violation of Section 143 where 16 and 17 year olds are found to have been employed during the school year between the hours of 10:00 PM and 12:00 midnight.
- 2- If used for work on Sunday through Thursday, this consent form must be supplemented by a certification of Satisfactory Academic Standing from the minor's school at the end of each marking period.