

STATE OF WISCONSIN WORK PERMIT REQUEST FORM

The following items **MUST BE PROVIDED IN PERSON** before a work/street trades permit can be issued to the minor or parent/guardian:

1. **REQUIRED:** A duly attested **birth certificate (preferred form of age documentation)**, or a **verified baptismal certificate**, or a **driver's license**, or **photo ID card** issued by the **Department of Transportation**, or a **school record for proof of the minor's age**.
2. **REQUIRED:** The minor's **Social Security card for proof of Social Security number**. If the minor's Social Security card is lost, then the Social Security number **MUST** be verified by contacting a Social Security representative. To do that, the minor and/or the minor's parent, guardian, or court-ordered foster parent must go to the Lancaster Office of Social Security and request a replacement card. The Social Security Representative will provide you with a print out verifying the minor's social security number.
3. **REQUIRED:** Completion on this form of the employer information below; or a letter from the employer containing the employer's name, address, telephone number, and signature, along with a statement of the intent to employ the minor, the job title, the job duties, the days of work, and the approximate number of hours of work per week.
4. **REQUIRED:** The signature below of the minor's parent, guardian, or court-ordered foster parent; or a letter from the minor's parent, guardian, or court-ordered foster parent giving consent for the minor to accept the employment being offered by the employer.
5. **REQUIRED:** Payment *from the employer* of **\$10.00** for the work permit fee. If the permit fee is paid by the minor rather than the employer, then the employer shall reimburse the minor for the permit fee no later than the first pay check issued to the minor.

EMPLOYER MUST COMPLETE THIS SECTION – WORK PERMIT REQUIRED INFORMATION

Employer Name		Today's Date	
Employer Mailing Address/City/State/Zip			
Employer Telephone Number		Employer Fax Number	
Printed Name of Minor Being Hired		Date Minor Will Begin Employment	
Title of the Job Minor Will Be Performing		Approximate Number of Hours Per Week Minor Will Be Working	
Days of the Week Minor Will Be Working Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday <input type="checkbox"/>			
Provide a Brief Description of Job Duties:			
Printed Name of Employer Representative		Signature of Employer Representative	

PARENT OR GUARDIAN MUST COMPLETE THIS SECTION – REQUIRED INFORMATION

Name and Address of School that the Minor is Attending		
Do Parents Own this Business? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the Minor a H.S. Graduate? Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the Work Being Performed as Restitution? Yes <input type="checkbox"/> No <input type="checkbox"/>
Printed name of Parent, Guardian, or Court-Ordered Foster Parent	Signature of Parent, Guardian, or Court-Ordered Foster Parent I give my permission for the minor whose name is listed above to accept the work that is described above.	