

ENTERTAINMENT APPLICATION FOR EMPLOYMENT OF A MINOR

ARKANSAS DEPARTMENT OF LABOR, LABOR STANDARDS DIVISION
10421 WEST MARKHAM ST, LITTLE ROCK, AR 72205
501-682-4500

Section 1 STATEMENT OF PARENT, GUARDIAN OR CUSTODIAN

(This statement must be completed by the parent, guardian or custodian of this child and signed by the parent, guardian or custodian, and also by the child.)

_____, Arkansas, _____
(City or Town) (Month, Day and Year)

I, the undersigned, hereby affirm that I am the _____
(Parent, Guardian or Custodian)

of _____, now residing at
(First Name) (Middle Name) (Last Name)

(Give Street and Number, City, County, State, Zip Code)

and that _____ is the _____ child of _____
(He/She) (1st, 2nd, etc.) (Father's Full Name)

and _____
(Mother's Maiden Name)

and was born in _____
(City) (County) (State)

on the _____ day of _____, _____, and is now _____ years of age.
(Month) (Year)

School last attended _____, _____, in _____
(Name of School) (Location) (Year)

Grade completed _____

Child will be employed by _____
(Give Name of Employer and Address)

as _____
(Occupation of Minor)

and I am willing that _____ be so employed, and ask that an employment certificate be Issued to said child as provided by law.

(Signature of Parent, Guardian or Custodian)

(Signature of Child – Must Sign Own Name)

(Address of Parent, Guardian or Custodian)

Section 2 INTENTION TO EMPLOY (This form is to be filled out by Employer)

Date: _____

I, the undersigned intend to employ:

(Name of Minor) (Address of Minor)

in the capacity of _____
for (Specific Occupation)

the time period _____
(Dates of Employment)

_____ hours per day, beginning _____ a.m. and ending _____ p.m., at _____
(Location)

The child's rate of pay will be _____ per _____
(Hour, week, month)

Name of the employer representative designated to coordinate all matters relating to the child's welfare at the place of employment

Description of work minor is to perform, including any athletic activity, stunts, or special effects involved:

The undersigned intends to employ the above-named minor immediately upon receipt of an Entertainment Work Permit issued by the Arkansas Department of Labor and agrees to comply with the provisions of Arkansas law and regulations and the federal Fair Labor Standards Act.

(Signature of Employer or Authorized Agent)

(Address of Employer)

Section 3. ATTACHMENTS

- 1. Proof of Age
- 2. Statement from a doctor, If applicable
- 3. Statement from school principal, If applicable
- 4. Proof of workers compensation