



**Arkansas Department of Labor and Licensing**  
**APPLICATION FOR EMPLOYMENT OF A MINOR**

**Mail To:**  
 Arkansas Dept of Labor and Licensing  
 Labor Standards Section  
 900 West Capitol STE 400  
 Little Rock, Arkansas 72201  
 Ph 501-682-4534 fax 501-682-4506  
 TDD (800) 285-1131

**INSTRUCTIONS:**

**SECTION 1**

- All sections **must** be completed before submitting the application. ***If all sections are not completed, the application will be denied.***
- As a means of establishing age, please submit a copy of one of the following documents with the application:
  - Certificate of Birth;
  - Driver's License;
  - State or Federal I.D. card
  - Notarized copy of school record listing the minor's name and date of birth
- The parent/guardian/custodian, child and the employer must sign the application or the application will be denied.

**NOTE: A WORK PERMIT IS NOT REQUIRED FOR A MINOR 16 YEARS OF AGE. HOWEVER THERE ARE FEDERAL LAWS THAT LIMIT THE JOBS THESE MINORS CAN PERFORM. FOR MORE INFORMATION PLEASE VISIT [WWW.YOUTHRULES.GOV](http://WWW.YOUTHRULES.GOV)**

**Statement of Parent, Guardian Or Custodian**

**SECTION 2**

I, the undersigned, hereby affirm that I am the \_\_\_\_\_ of \_\_\_\_\_ now residing at \_\_\_\_\_  
(Parent, Guardian or Custodian) (First Name)(Middle Name)(Last Name)  
 \_\_\_\_\_,  
(Street and Number) (City) (County) (State) (Zip Code)

and that \_\_\_\_\_ was born in \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_  
(He/She) (City) (County) (State)

\_\_\_\_\_, 20\_\_\_\_ and is now \_\_\_\_\_ years of age. School currently attending or last attended:

\_\_\_\_\_  
(Name Of School) (Location)

I am willing that \_\_\_\_\_ be so employed as stated in Section 3 of the application and ask that an employment certificate be issued as provided by law.  
(He/She)

\_\_\_\_\_  
(Signature of Parent/Guardian/Custodian) (Printed Name of Parent/Guardian/Custodian) (Signature of Minor)  
 \_\_\_\_\_  
(Email Address of Parent/Guardian/Custodian: Optional) (Phone number of Parent/Guardian/Custodian)

**Intention to Employ** *This section is to be completed in full and signed by the employer. Information must be provided or permit will not be issued.* **SECTION 3**

**The undersigned intends to employ:**

\_\_\_\_\_  
Name of Minor Address City State in the capacity of \_\_\_\_\_  
 \_\_\_\_\_  
Occupation in the Type of business industry for \_\_\_\_\_ days per week, \_\_\_\_\_ hours per day on the following days:

(Complete start and end times for only the days that apply)

Mon: Start \_\_\_\_\_ End \_\_\_\_\_ Tues: Start \_\_\_\_\_ End \_\_\_\_\_ Weds: Start \_\_\_\_\_ End \_\_\_\_\_ Thurs: Start \_\_\_\_\_ End \_\_\_\_\_  
 Fri: Start \_\_\_\_\_ End \_\_\_\_\_ Saturday: Start \_\_\_\_\_ End \_\_\_\_\_ Sunday: Start \_\_\_\_\_ End \_\_\_\_\_

Employment during Vacation Periods? Yes No Employment during school year Yes No

If the minor's schedule will vary, list the earliest possible beginning time and the latest possible ending time. Please note that Arkansas law allows a minor 14 and 15 years of age to work until 7:00 p.m. on nights that precede a school day and until 9:00 p.m. on nights that do not precede a school day. **If your business is subject to the Fair Labor Standards Act, a minor may not be employed: 1) during school hours; 2) before 7:00 a.m. or after 7:00p.m., except June 1 through Labor Day, when the hour is extended to 9:00 p.m.; more than three (3) hours a day on a school day, including Fridays; 4) more than eight (8) hours a day on a non-school day; 5) more than eighteen (18) hours a week during a school week; 6) more than forty (40) hours a week during non-school weeks.** To obtain additional information on Federal child labor laws, you will need to contact the U.S. Department of Labor at (501) 223-9114, or visit [www.youthrules.dol.gov](http://www.youthrules.dol.gov). Failure to comply with these regulations will result in the application being denied.

The undersigned intends to employ the above-mentioned minor immediately upon receipt of a certificate issued by the Arkansas Department of Labor and agrees to comply with the provisions of the Arkansas Statutes and the Fair Labor Standards Act relating to the employment of minors.

If you wish to receive the permit by email, then please provide your email address here: \_\_\_\_\_

\_\_\_\_\_  
Name of Business/Employer Mailing Address City State Zip

\_\_\_\_\_  
Signature of Employer or Authorized Agent Printed name of Employer or Authorized Agent Employers Telephone Number (Area Code First)

**REMINDER: Proof of age must be attached to application or permit will not be issued.**

Office Use:  
 Approved \_\_\_\_\_ Denied \_\_\_\_\_ Date \_\_\_\_\_