

**APPLICATION FOR**

**SPECIAL WORK PERMIT**

Minor’s First Name:        Minor’s Last Name:

*Instructions for Completion:*

1. *Complete all sections of this application.*
2. *Type or print - make sure information is legible.*
3. *Use legal name for minor, parent and employer.*
4. *Have authorization signatures notarized.*
5. *Have proof of age documents ready to submit.*
6. *Fax completed package to (410) 333-7303 or email to:*

*dldliemploymentstandards-dllr@maryland.gov*

Parent/Guardian Full Name:

Address:

City:        State:        Zip:

Contact Telephone:        Date of Birth:

School Name:

**Employer Information**

1. *Complete your section of this application and return*
2. *to the parent/guardian.*

*2. Do not allow minor to work until the official work*

1. *permit is in your possession.*
2. *3. Work permits are not transferable and are required*

*until the minor’s 18th birthday.*

Company Name:

Address:

|  |
| --- |
| Select Type of Activity[ ]  Musical Performance [ ]  Stage Performance[ ]  Talent Performance[ ]  Film Production[ ]  Modeling/Demonstration[ ]  Educational Services [ ]  Other Services. Please describe:             \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

City:        State:        Zip:

Contact Telephone:

Fully describe work duties, dates of employment and hours:

I agree to employ the above named minor under the conditions listed above.



Employer Signature:

Sworn and subscribed to me this       day of       ,       .

Notary Public:

 Signature Name (print)

**Authorization from Parent/Guardian**

As the parent/guardian of the above named minor, I recognize they are being employed at the place of work described above with my full knowledge and consent. I hereby certify that, to the best of my knowledge, the information herein is correct and true. I request issuance of a Special Work Permit to the above named minor.



Parent/Guardian Signature:

Sworn and subscribed to me this       day of       ,       .

Notary Public:

 Signature Name (print)

Permit not valid unless signed and officiated by the Commissioner of Labor and Industry or authorized agent.

 Signature Title Date

**Department of Labor**

**Division of Labor and Industry
Employment Standards Service**10946 Golden West Drive, Suite 160
Hunt Valley, MD  21031
Telephone Number: (410) 767-2357 • Fax Number: (410) 333-7303

E-mail: [dldliemploymentstandards-dllr@maryland.gov](file:///C%3A%5CUsers%5Cmmyer%5CDesktop%5CDesktop%5Cdldliemploymentstandards-dllr%40maryland.gov)

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