## SCHOOL RECORD

Name of Parent/Guardian		
Residence of Parent/Guardian		
Phone of Parent/Guardian		
Name of Minor		
Residence of Minor		
Birth Place of Minor		
Town	State	County
Date of Birth		
Signature of Minor		
Signature of Parent/Guardian		

This certificate must be retained by official issuing the employment certificate. School record should be issued only when child presents statement by prospective employer duly filled out as required by law.

## STATEMENT OF PROSPECTIVE EMPLOYER

	expect to give employme	ent to	
Company Name			irst Name
as	a	for	hours a
Last Name	State Nature of Job		
day and days a week	upon receipt of proper employment certif	fication requi	red by law.
Employee will start work at	and will quit work at	······································	
Name of prospective emplo	yer and title (i.e. manager, director, etc.)		
Describe type of business (i.	e. restaurant, grocery, talent agency, etc.	)	
Address	City/Town	State	Zip
Phone Number of Business		D	ate

## **INFORMATION OF APPLICANT – PROCEED AS FOLLOWS:**

- 1. Have statement by prospective employer completed.
- 2. Have school record form completed with parent signature.
- 3. Have physical examination report completed by physician. (If you are a Streamwood High students this is not necessary, we have your physical on file.)
- 4. Procure documentary proof of age in order named: Birth Certificate, baptismal or passport. Hospital record of birth cannot be accepted.
- 5. **Turn all forms into the main office** work permit should be ready the following afternoon.