

Work Licence: _____

Date Issued: _____

Archive Date: _____

**Children and Young Persons Act 1933 – 1963
(as amended by the Education Acts 1944 – 1976
and the Childrens Act 1972)**



APPLICATION FOR CHILD EMPLOYMENT LICENCE

The **employer** must complete paragraphs 1 -13 of this form and give it to the parent within one week of the employment commencing. The parent should then sign the declaration at paragraph 14. This form must be sent to (Wrexham County Borough Council, Child Employment Officer, Education Inclusion Service, 16 Lord Street, Wrexham, LL11 1LG. Tel No: 01978 298851)

EMPLOYER (ALL SECTIONS MUST BE COMPLETED FULLY)

1. Name of Business: _____

2. Address: _____

3. Post Code: _____ Tel No: _____

4. Nature of Business: _____

5. Name of Person Responsible for Child Employment: _____

6. Nature of Child's Employment: _____
(Full details must be given. Use reverse of this form if necessary).

7. Location of Child's Employment: _____

8. Date of commencement of the employment: _____

9. *Proposed days and times of employment:

School days from _____ a.m. to _____ a.m. AND/OR

from _____ p.m. to _____ p.m.

Saturdays from _____ to _____ (times)

Sundays from _____ to _____ (times)

Weekdays in holidays from _____ to _____ (times)

*If any change is subsequently proposed in the days or times of employment, a fresh application must be submitted).

CHILD EMPLOYED

10. Name: _____ Date of Birth: _____

11. Address: _____ Tel No: _____

12. School Attended _____

13. EMPLOYER'S DECLARATION

I will ensure that during the course of Employment the child wears suitable clothes and footwear. I the undersigned do certify that I have carried out a specific Young Persons Risk assessment in relation to this employment as required under the Health and Safety (Young Persons) Regulations 1997 and shared its findings with the Parents/Guardians and the child. I hold an employer liability insurance.

Employer's signature: _____ Date: _____

14. PARENT/GUARDIAN DECLARATION

I consent to my child/ward undertaking the employment specified above, and to the medical examination by the School Medical Officer if necessary. I certify that the above information is correct and that my child is medically fit to carry out the above duties of the employment. The employer has explained about the risk assessment carried out prior to the commitment of the employment and I understand its findings.

Signed: _____ Date: _____