

MINOR'S STATEMENT IN PLACE OF PARENT'S OR LEGAL GUARDIAN'S SIGNATURE/VERIFICATION

DIRECTIONS: A minor between the ages of 14 and 18 applying for a work permit may submit this witnessed Statement instead of their parent's or legal guardian's signed verification on their Work Permit Application.

- This Statement must be attached to your Work Permit Application.
- A Notary Public, judicial officer, or clerk of court must watch you sign this Statement (below). If a Notary Public witnesses your signature, they must affix their Notary Seal. Do not sign this Statement before you appear before a Notary Public, judicial officer, or clerk of court.
- Submit this Statement with your attached Work Permit Application to the issuing officer who accepts applications and issues work permits for your school district.
- By signing this document, you are attesting to and certifying the accuracy of the facts set forth in your Work Permit Application and this Statement.

STATEMENT IN PLACE OF PARENT'S/LEGAL GUARDIAN'S SIGNATURE/VERIFICATION

TO BE COMPLETED BY THE WORK PERMIT APPLICANT IN FRONT OF A NOTARY PUBLIC, JUDICIAL OFFICER, OR CLERK OF COURTS:

This Statement is being submitted with my Work Permit Application instead of a parent's or legal guardian's signature and verification under Section 9(b)(1)(i)(B) of the Pennsylvania Child Labor Act, 43 P.S. §§ 40.1-40.14.

I attest to and certify the following:

- That I am the applicant named in the attached Work Permit Application.
- That my parent or legal guardian is unable to sign and verify the facts set forth in the attached Work Permit Application because of circumstances beyond my control.
- That the facts set forth in the attached Work Permit Application and this Statement are accurate to the best of my personal knowledge or information and belief.

I understand that false statements constitute grounds for criminal penalties under 18 Pa.C.S. § 4903 (relating to sworn falsifications).

MINOR/APPLICANT (SIGNATURE)

MINOR/APPLICANT (PRINTED NAME)

To Be Completed By a Notary Public, Judicial Officer, or Clerk of Court:

State of _____

County of _____

Signed (or attested) before me on _____ (date)

by _____ (Name of Notary Public, Judicial Officer or Clerk of Courts)

Signature of Notary Public, Judicial Officer, or Clerk of Court: _____

Stamp (if required)

Title of Office _____

My Commission Expires _____

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