

WEST VIRGINIA DIVISION OF LABOR

1900 Kanawha Boulevard East - State Capitol Complex – Building 3, Room 200 - Charleston, WV 25305

Email Address: WageandHour@wv.gov - Fax: (304)558-3797 - Telephone: (304)558-7890

Website: labor.wv.gov



WORK PERMIT FOR A FOURTEEN (14) OR FIFTEEN (15) YEAR OLD MINOR

Authorized by W. Va. Code §21-6-3, §21-6-4, §21-6-5, and §21-3-10a

SECTION A - To Be Completed by the Minor's Prospective Employer (Attach additional sheets if necessary)

1. I intend to employ _____ to perform the following tasks or jobs and to use
Full Legal Name of Minor
the following tools or equipment: _____

2. I will employ the minor beginning on _____ for a maximum of _____ hours per week, as follows:
Date # of hours

WORK SCHEDULE

☐ Employment While School is in Session

☐ Summer Employment

Monday _____ am _____ pm to _____ am _____ pm

Tuesday _____ am _____ pm to _____ am _____ pm

Wednesday _____ am _____ pm to _____ am _____ pm

Thursday _____ am _____ pm to _____ am _____ pm

Friday _____ am _____ pm to _____ am _____ pm

Saturday _____ am _____ pm to _____ am _____ pm

Sunday _____ am _____ pm to _____ am _____ pm

3. _____
Employer's Business Name and Address

Employer's Business Telephone Number and Email Address

4. _____
Description of Employer's Business

By my signature below, I understand and expressly agree that the minor will be legally employed as set forth above or as modified in Section D below, and as required by the Child Labor Act, W. Va. Code §21-6-1 through §21-6-11, which includes providing at least a thirty (30) minute meal break for each day the minor works five (5) or more hours.

I further acknowledge that I will keep this Work Permit on file as long as the minor is employed by me.

Printed Name and Signature of Employer or Employer's Authorized Representative and Title

Date

Telephone Number and Email Address of Person Completing this Section

SECTION B – To Be Completed by the Minor’s Parent or Legal Guardian

I, _____ am the ☐ parent or ☐ legal guardian of
Printed Name of Parent or Legal Guardian

_____, born on _____
Full Legal Name of Minor Date of Birth

in _____, and who is _____ years old.
Town or City and State of Birth

I have attached my child’s ☐ Certified Birth Certificate or ☐ a Certified Copy of the Birth Certificate to this Work Permit.

By my signature below, I consent to the employment of my child as described in Section A or as modified in Section D.

Signature of Minor’s Parent or Legal Guardian Date

Address and Daytime Telephone Number of Minor’s Parent or Legal Guardian

SECTION C – To Be Completed by the Principal or Registrar of the Minor’s School *

I, _____, ☐ am the Principal or ☐ Registrar of
Printed Name of Principal or Registrar

_____. I certify that _____
Name of Minor’s School Full Legal Name of Minor

is currently enrolled in or is attending this school.

Signature of Principal or Registrar Date

Address, Telephone Number, and Email Address of the Principal or Registrar

* Section C may also be completed by the superintendent of schools or issuing officer when the minor is attending public school in the same county that the work permit is issued.

* For homeschooled minors, Section C is completed by the individual, parent or guardian that is responsible for the minor’s education.

SECTION D – To Be Completed by the County Superintendent of Schools or Authorized Issuing Officer

I, _____, ☐ am the Superintendent of Schools or ☐ the issuing officer
Printed Name of Superintendent of Schools or Issuing Officer

appointed by the Superintendent of Schools for _____ County to review this Work Permit. In deciding
County

whether to issue, modify or reject this Work Permit, I certify that I have reviewed Sections A, B, and C and verified the
minor's age as evidenced by a certified birth certificate or a certified copy of the birth certificate.

By my signature below, I am ☐ issuing ☐ modifying or ☐ rejecting this Work Permit, effective _____.
Date

The modifications, if any, are as follows: _____

The reason(s), if any, for rejecting this Work Permit are as follows: _____

Signature of Superintendent of Schools or Issuing Officer

Date

Address, Telephone Number, and Email Address of the Superintendent of Schools or Issuing Officer

Original Work Permit must be retained by the Superintendent of Schools or Issuing Officer.

**Copy of issued Work Permit ☐ mailed or ☐ emailed to the West Virginia Division of Labor to the email address of
WageandHour@wv.gov within four (4) days of issuance as required by W. Va. Code §21-6-4(b).**

Copies mailed to the Minor's ☐ Parent or ☐ Legal Guardian and the Minor's ☐ Employer.