

APPLICATION FOR WORK PERMIT



Directions:

- 1.) Complete the following Information:
 - a. Name of Minor
 - b. Sex
 - c. Color of Hair
 - d. Color of Eyes
 - e. Place of Residence
 - f. Place of Birth
 - g. Date of Birth
- 2.) Obtain the Signature of a Parent, Guardian or Legal Custodian
- 3.) Return completed form along with an official document that verifies your date of birth such as:
 - a. Transcript of Birth Certificate
 - b. Baptismal Certificate or Transcript
 - c. Passport
 - d. Other Documentary Evidence
 - e. Affidavit of Parent or Guardian accompanied by Physician's statement of opinion as to age of the minor
- 4.) All forms should be returned to the Coatesville Area Intermediate High School Attendance Office for processing.

✂ Cut Here ✂

APPLICATION FOR WORK PERMIT

Date of application _____

Certificate/Permit number _____

Date issued _____

PDE-4565 (1/13)

A. To be completed by issuing officer

Name of minor _____	Sex _____ Color of hair _____ Color of eyes _____	Signature of issuing officer _____
---------------------	---	------------------------------------

Any physical work restrictions _____	School district - name and address COATESVILLE 9-10 CENTER 1425 East Lincoln Highway Coatesville, PA 19320	
Place of residence _____	Place of birth _____	

Date of birth			Evidence of age accepted and filed. Evidence shall be required in the order designated. Cross out all but the one accepted.		
Month	Day	Year	a. Transcript of birth certificate	b. Baptismal certificate or transcript	c. Passport
			d. Other documentary evidence	e. Affidavit of parent or guardian accompanied by physician's statement of opinion as to the age of the minor	

B. To be completed by parent or guardian, unless minor is a high school graduate (please attach proof of graduation)

Signature of parent, guardian or legal custodian* _____	Name and address of parent, guardian or legal custodian _____
---	---

Commonwealth of Pennsylvania - Department of Education

*In lieu of signature under clause (B), the applicant may execute a statement before a notary public or other person authorized to administer oaths attesting to the accuracy of the facts set forth in the application on a form prescribed by the department. The statement shall be attached to the application.