

## EMPLOYMENT OF SCHOOL CHILDREN APPLICATION FOR A WORK PERMIT

- Employer to discuss proposed employment with parent or carer and child.
- Employer completes the application (Section 1) – completion of the Risk Assessment **MUST** be indicated.
- Parent signs Health Declaration and Risk Assessment (Section 2).
- A passport-size photograph of the child to be sent with the completed application to the Child Employment Team. The child's name and date of birth must be noted on the reverse for identification purposes.
- Parents retain pages 1 and 2 for information.

### Please note:

- No child under 13 years of age may be employed.
- A child needs a work permit while they are of compulsory school age.
- The school leaving date is the last Friday in June of a child's compulsory education (end of Year 11).
- A child may be employed to do 'light work' only.
- All application forms should be submitted to the Local Education Authority (LEA) within one week after the employment begins.
- This permit can be withdrawn if the school disagrees with any details relating to this employment.

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### For all Child Employment matters:

- Telephone: 01473 265195
- Email: [childemployment@suffolk.gcsx.gov.uk](mailto:childemployment@suffolk.gcsx.gov.uk)
- Address: Child Employment Team  
Suffolk County Council  
Endeavour House  
8 Russell Road  
Ipswich  
Suffolk  
IP1 2BX

## **REGULATIONS FOR THE EMPLOYMENT OF SCHOOL CHILDREN (Suffolk Byelaws)**

It is important to note that the conditions below are a summary of the main Regulations and Byelaws.

A child can only be employed on school days for up to two hours a day. This can be either one hour between 7.00 am and 8.30 am and one hour between the end of the school day and 7.00 pm or two hours between the end of the school day and 7.00 pm.

### **Weekends During Term Time**

Children between 13 years and 15 years are limited to a maximum of five hours on Saturdays (between 7.00 am and 7.00 pm) and a maximum of two hours on Sundays (between 7.00 am and 7.00 pm).

Children aged 15 years and above are permitted to work a maximum of eight hours on Saturdays (between 7.00 am and 7.00 pm) and a maximum of two hours on Sundays (between 7.00 am and 7.00 pm).

### **Children can only work a total of 12 hours per week during term time**

**Non-school days** (Saturdays, Sundays and during school holidays).

Children between 13 years and 15 years are limited to working a maximum of five hours per day Monday to Saturday between 7.00 am and 7.00 pm, and a maximum of two hours on Sunday between 7.00 am and 7.00 pm. They are allowed to work up to a maximum of 25 hours per week.

Children aged 15 years and over are limited to working a maximum of eight hours per day Monday to Saturday between 7.00 am and 7.00 pm and a maximum of two hours on Sunday between 7.00 am and 7.00 pm. They are allowed to work up to a maximum of 35 hours per week.

The hours worked include intervals of 15 minutes and more for rest.

### **No child shall be employed before 7.00 am and after 7.00 pm**

All children must have a two week period free from work during their school holidays each year.

### **Penalties**

The penalties for failing to adhere to Sections 18 and 20 of the Children and Young Persons Act 1933 could lead to a fine of up to £1,000 (see local Byelaws for details).

### **Statutory school leaving date**

This is the last Friday in June of a child's statutory education. (The school year during which the child reaches 16 years of age [year 11]).

If you have any queries regarding this application form, the type of work to be undertaken and risk assessments, please contact the Child Employment Officer. Contact details can be found on the front of this application form.

# WORK PERMIT APPLICATION

## SECTION 1 (To be completed by the proposed employer)

### Child's Details:

PLEASE COMPLETE USING BLOCK CAPITALS

Child's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

MALE / FEMALE (please circle)

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Telephone Number: \_\_\_\_\_

School: \_\_\_\_\_ Form /Class: \_\_\_\_\_

### Employer's Details:

Employer's Name: \_\_\_\_\_ Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Postcode \_\_\_\_\_

Business/Profession: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Nature of proposed employment: \_\_\_\_\_

Place of employment: \_\_\_\_\_

Days and hours of Employment: between \_\_\_\_\_ and \_\_\_\_\_ on school days  
(maximum two hours)

between \_\_\_\_\_ and \_\_\_\_\_ on Saturdays and  
school holidays

between \_\_\_\_\_ and \_\_\_\_\_ on Sundays  
(maximum 2 hours)

Maximum hours per week term time: \_\_\_\_\_

Maximum hours per week school holidays: \_\_\_\_\_

Risk Assessment completed and shared with parents of the child YES  NO

**Risk Assessment Declaration by Employer "I confirm that an appropriate risk assessment has been carried out under the requirements of the Management of Health and Safety at Work Regulations 1999 and the young person's parents informed of the findings and the control measures introduced to reduce any risk".**

Signature of employer: \_\_\_\_\_ Date \_\_\_\_\_

Print name \_\_\_\_\_

**SECTION 2 (To be completed by parent/carer)***PLEASE PRINT USING BLOCK CAPITALS*

**HEALTH DECLARATION:** I declare that to the best of my knowledge and belief the above child is fit to work and that proper provision has been made to secure his/her health. I further declare that to do so would not be prejudicial to his/her health or physical development and will not prevent him/her from obtaining benefit from his/her education. I give my permission for the LA to make any enquiries into my child's health and wellbeing, if deemed necessary, with regard to his/her employment. I have read the regulations on the reverse of this form.

**Risk Assessment:** Parent "I confirm that the employer has provided me with information about the findings of the risk assessment he/she has undertaken and the control measures introduced to reduce any risk assessed."

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PRINT NAME: \_\_\_\_\_

**Please return completed application form to:**  
**Child Employment Team**  
**Suffolk County Council**  
**Endeavour House**  
**8 Russell Road**  
**Ipswich**  
**Suffolk**  
**IP1 2BX**

**SECTION 3 (For official use only)**

To be completed by CEO. Type of work – please tick one category

Paper Delivery		Cleaning		Animal Care		Housekeeping	
Sales Assistant		Caring		Catering		IT / Computers	
Administration		Horticulture		Agriculture		Other	

Employment Permit approved by: \_\_\_\_\_

Signature of LA representative: \_\_\_\_\_

Permit number: \_\_\_\_\_ Date of Issue: \_\_\_\_\_

Date School Check Completed: \_\_\_\_\_