PLEASE FOLLOW THE PROCEDURES BELOW FOR WORKING PAPERS

Once <u>ALL</u> portions are filled out (Sections A-D), please email the form to tmartin@longbranch.k12.nj.us to have the document signed. Forms <u>WILL NOT</u> be signed without all information + <u>highlighted parts</u> completed, signed and dated.

If you have any questions, please contact Mrs. Martin at the email address above.

NEW JERSEY DEPARTMENT OF EDUCATION

A300 Combined Certification Form

Date Printed:

Date(s) of previously issued certificates (if applicable):

Cooperative Education Experience (CEE) - Hazardous Occupation	CEE -	Non-Hazardous Oc	cupation	Paid Structured Learning Experience
A. Minor's	Personal	Information		
First Name M.J. Last Name		Social Security No	i.	
Street Address (Line 1) Floor/Apt. No. (Line 2)		Date of Birth	Age	City of Birth
City State Z	Lip Code	County of Birth		State/Country of Birth
Telephone No. Cell/Afternate No.				Hair Color
				Eye Color
Parent/Guardian First Name Parent/Guardian Last Name		Distinguishing Facial Marks (if applicable)		
Parent/Guardian Address (if different than minor's address) Floor/Apt, No.	"	I hereby authorize the employment of my child as specified below under Employment information.		
City State Z	ip Code			
Parent/Guardian Telephone No. Alternate Telephone No.	,	Signature of Paren	u/Guardian	Date
B. Emplo	yment In	formation		· · · · · · · · · · · · · · · · · · ·
Employer Business Name	-	Type of Business/I	ndustry	
Street Address (where minor will be employed) Floor/Suite (Line 2)		Minor's Job Title ((Be specific)	, , , , , , , , , , , , , , , , , , ,
City State Z	i i	Is liquor sold on the premises? If Yes, are the entire premises licensed? If No, describe what areas of the premises are licensed, including any outside grounds:		
Contact Person Name	Ī			
Telephone No. Alternate Telephone No				
Minor's Hours of Work (Provide daily hours and/or start and end times)		Promise of Employment: I have offered employment to the above named minor for the hours stated. I understand that these hours may be flexible but may not exceed the number of hours permitted by law		
Mon Tues Wed Thurs Fri Sat O Sun O Total Hours for Week:		according to the age of the minor.		
Wages: Per Hour Weekly Other	l	Signature of Emplo	oyer:	Date
C. Physician's Certification (to be completed by licensed physician): 1 hereby certify that I have examined the above named minor on and I designate the minor's physical qualifications regarding the above promise of employment as: Date				
Signature of Doctor Date Address				
D. Proof of Age (for Issuing Officer). There examined the proof of age submitted by the above named minor which was in the form of (select one): Birth Certificate Baptismal Certificate Passport Other documentary proof in existence for at least one year (specify):				
Affidavit of Parent/Guardian together with 1) physician's statement of opinion as to age of minor, and 2) school record of age and the above date of birth				
E. School Record (to be completed by school that the minor attends)			suing Officer (
School District County Long Branch High School Monmouth	10.710.74.7	District Branch High S	school	County Monmouth
Name of School Long Branch High School	School	School District Address 404 Indiana Avenue Long Branch NJ 07740		
School Address		one No.		
404 Indiana Ave. Long Branch, NJ.	(732)	(732) 229-7300		
Last Grade Completed		Regular Employment Certificate Vacation Employment Certificate (summer & other school vacations)		
The above named minor attends school in this district and has completed the wor of the above grade. To the best of my knowledge the minor can do the work proposed without impairment of progress in school.	I — 4.	5 5	ed to persons 18 to	· · · · · · · · · · · · · · · · · · ·
	Signati	re of Minor		Date
Signature of Principal Date	Signati	ire of Issuing Offic	er D	ate of Issue Certificate No.

INSTRUCTIONS FOR A300 COMBINED CERTIFICATION FORM

- 1. Employment Information (section B) After you have completed your personal information (section A), bring your certification form to the employer. The employer completes the Employment Information and signs and dates the Promise of Employment. If any of the employment details have been pre-filled and are incorrect, the employer must cross out the incorrect information and enter, initial and date the corrections.
- 2. Physician's Certification (section C) The school district is responsible for performing the physical examination at no cost to you or your parents. A school physical (including a sports physical) performed during freshman year is good for all four years of high school (unless the school district policy specifies more frequent physicals).
 - If your parent/guardian prefers that you be examined by a doctor other than the one employed by the school district, you may do so at your parent/guardian's expense. A minor is not required to obtain a physical if the parent/guardian objects (in writing) based on their religious beliefs and practices.
- 3. **Proof of Age** (section D) If the school does not have a copy on file, you may be asked to provide a birth certificate, passport, baptismal certificate or other identification documentation to the School Issuing Officer.
- 4. Parent/Guardian Authorization (section A) Your parent/guardian must indicate his/her authorization of your employment as specified in the Employment Information by signing and dating the Parent/Guardian authorization.
- 5. School Record/Issuing Officer Certification (sections E & F) Bring the completed certification form to your school district. A designated school official will review the form and issue the working papers only after being satisfied that the working conditions and hours will not interfere with your education or damage your health. The official may refuse to issue working papers if such refusal would be in your best interest.

IMPORTANT INFORMATION

Hours of Work - 14 & 15 Year Olds

- no more than 3 hours a day on a school day
- no more than 18 hours a week during a school week
- may not work before 7:00 am or after 7:00 pm during the school year
- summer vacation: may work up to 8 hours a day, 40 hours a week, and may work up to 9:00 pm with written parental permission (which must be on file with the employer)

Hours of Work - 16 & 17 Year Olds

- no more than 8 hours a day
- no more than 40 hours a week
- may not work before 6:00 am or after 11:00 pm
 Exception: may work after 11:00 pm (up to 3 am provided work begins before 11 pm) during regular school vacation and when there is no school the next day with written parental permission (which must be on file with the employer)

Hours of Work - All Minors

- no more than 6 consecutive days
- may not work more than 5 continuous hours without at least a 30-minute meal break

Hours of Work - School-Sponsored Cooperative Education Experiences, Apprenticeships and Paid Structured Learning Experiences - Training site experiences may not exceed five hours on any day that school is in session nor may the combination of school and work exceed eight hours on any day that school is in session.

Prohibited Work— Certain potentially hazardous jobs are prohibited for minors based on the age of the minor. For a complete list of prohibited occupations, visit the Department of Labor and Workforce Development's website at www.nj.gov/labor and click on Wage & Hour.

www.nj.gov/education - New Jersey Department of Education www.nj.gov/labor (click on Wage & Hour) – New Jersey Department of Labor and Workforce