

Instructions to Applicants for Certificates

Kenmore-Town of Tonawanda
Union Free School District

Certificates will be issued Sept. 1 through June 30th: July 1 through August 31:
During these hours ➡ 7:30 a.m. – 3:15 p.m. 7:30. – 2:45 p.m.

Bring with you:

1. Completed application signed by parent or guardian.
2. Signed Physical Fitness Certificate (as described below)
3. Proof of age: birth or baptismal certificate, State issued photo, driver's license, or a copy of school record showing proof of age.

Read carefully—instructions for completing applications for Certificates:

A. For Part-time or vacation employment:

1. Have your parent or guardian sign Part 1 of the application.
2. Have a physical fitness certificate signed:
 - by your own family physician
 - or
 - by a school official certifying that you have had a physical within the last 12 months that shows you to be physically able
3. After you have completed all of the above, apply for your certificate at the issuing office of the school district in which you live. The address for the Ken-Ton School District office is listed above.

B. For Full time employment:

- If you have dropped out of school and are going to work full time, in addition to 1-4 above, your parent or guardian must accompany you to the issuing office.

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
Albany, New York 12234

Application for Employment Certificate

(See reverse side of this form for information concerning employment of minors.)

All signatures must be handwritten in ink, and applicant must appear in person before the certifying official.

PART I. Parental Consent (To be completed by applicant and parent or guardian. Parent or guardian must appear at the school or issuing center to sign the application for the first certificate for full-time employment, unless the minor is a graduate of a four-year school and presents evidence thereof. For all other certificates, the parent or guardian must sign the application, but need not appear in person to do so.)

Date: _____

I, _____
(Applicant) (Age)

_____ apply for a certificate as checked below:

(Complete home address – include street, town and Zip Code)

- ☐ **Non-factory-Employment Certificate:** Valid for lawful employment of a minor 14 or 15 years of age enrolled in day school when attendance is not required.
- ☐ **Student General Employment Certificate:** Valid for lawful employment of minor 16 or 17 years of age enrolled in day school when attendance is not required.
- ☐ **Full-Time Employment Certificate:** Valid for lawful employment of a minor 16 or 17 years of age who is not attending day school.

I hereby consent to the required medical examination and employment certification as indicated above,

Signature of Parent or Guardian: _____

PART II Evidence of Age (To be completed by issuing official only)

_____ Check evidence of age accepted. Document No. (if any) _____
Date of Birth

☐ Birth Cert. ☐ State Issued Photo I.D. ☐ Drivers License ☐ School Record ☐ Other (specify) _____

PART III Certificate of Physical Fitness

Applicant shall present a Certificate of Physical Fitness from a school or private physician. Said examination must have been given within 12 months prior to issuance of the employment certificate. If the certificate of physical fitness is limited, the issuing official shall issue a Limited Employment Certificate (valid for a period not to exceed 6 months unless the limitation noted by the physician is permanent, then the certificate will remain valid until the minor changes jobs). Enter the limitation on the employment certificate.

PART IV Pledge of Employment (To be completed by prospective employer only if applicant has a physical disability.)

(Part IV must be completed only for (a) a minor with a medical limitation; and (b) for a minor 16 years of age who is leaving school and resides in a district (New York City and Buffalo) which requires a minor 16 years of age who is not employed to attend school, according to Section 3205 of the Education Law.)

The undersigned will employ the applicant named above for _____ days per week, _____ hours per day, beginning at _____ a.m. ☐ m. ☐
ending at _____ ☐ a.m. ☐ n. Start Date: _____

Description of Job: _____ Job Location: _____

Firm Name: _____ Address: _____

☐ Factory ☐ Non-factory Telephone: _____ Signature of Employer: _____

PART V — Employment Certification (To be completed by issuing official only)

Certificate Number: _____ Date issued: _____

(Issuing Center)

(Address)

(Signature of Issuing Official)