

APPLICATION FOR THE MARYLAND WORK PERMIT FOR MINORS

Per your request, here is an application for the Maryland Work Permit for Minors. The printed copy of the application must be completed by all the required parties to complete the **online application provided you have access to a computer**. To complete the online application and to save the information to receive a data receipt please visit the website at www.dllr.state.md.us. Under the Quick Links section of the home page click on the link for Minor Work Permit and proceed to step number 5. Once this is completed, if you have access to a fax machine you may fax the **printed copy of the application, the minor data receipt, and a copy of a birth certificate, state issued identification card, driver's license or permit** to the attention of Miss Janice Stevenson at 410.767.2986. The information can also be emailed to jstevenson@dllr.state.md.us. If you do not have access to a computer, please mail the information to the address noted below:

**Division of Labor and Industry
ATTN: Miss J. Stevenson
1100 North Eutaw Street – Room 606
Baltimore, MD 21201**

Upon receipt of this information, I will be able to process a work permit and fax/mail a copy to your attention to provide to the employer. If you choose to have the copy faxed to you, please be advised that the faxed copy will serve as the minor's work permit until the original is received. If you should have any questions relating to this matter, please contact me directly at 410.767.2992.

Sincerely,
Miss Janice Stevenson
Administration Unit
Division of Labor and Industry



Directions For The Minor

First Name: _____
Last Name: _____
Street Address: _____
City: _____
County: _____
State: _____
Zip Code: _____
Home Telephone: _____
Date Of Birth: Month: ___ ___ Day: ___ ___ Year: ___ ___ ___ ___
School Name: _____

1. Complete your section of this application.
Type or print and make sure it is legible.
Use your correct legal name.
2. Have your Employer complete the Employer section.
3. Have your parent or guardian sign this application.
4. Use this data to complete the on-line application at:
www.dlir.state.md.us/labor/empm.shtml

For Proof of Age - You may use:
Birth Certificate
School Records
Valid Maryland Driver's License
Any official Government document

5. Take this Application, the online Application Receipt and your Proof of Age to any Issuing Officer and request Maryland Minor Work Permit.
6. Deliver the official Work Permit to your employer.

* A new permit must be obtained for each job *

Directions for the Employer

1. Complete your section of this application and return it to the minor for validation.
2. Do not allow minor to work until the official work permit is in your possession.
3. Work permits are not transferable and are required until the minor's 18th birthday.

Company Name: Mount St. Mary's University
Street Address: 16300 Old Emmitsburg Road
City: Emmitsburg
County: Frederick
State: Maryland
Zip Code: 21727
Telephone: 301-447-5372
Telephone Extension: _____
Employer Rep Name: Brenda McKeel
Employer Rep Signature: _____
Work Duties: Student worker

√ **Select - Type of Business**

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- ___ Accommodation & Food Services
- ___ Administrative & Waste Services
- ___ Agriculture, Forestry, Fishing & Hunting
- ___ Arts, Entertainment & Recreation
- ___ Construction
- √ Educational Services
- ___ Finance & Insurance
- ___ Health Care & Social Assistance
- ___ Information
- ___ Management of Companies & Enterprises
- ___ Manufacturing
- ___ Mining
- ___ Other Services except Public Administration
- ___ Professional & Technical Services
- ___ Public Administration
- ___ Real Estate & Renting & Leasing
- ___ Retail Trade
- ___ Transportation and Warehousing
- ___ Unknown
- ___ Utilities
- ___ Wholesale Trade

Directions for the Parent or Guardian Please sign and date the knowledge and consent statement.

This minor is being employed at the place of work described above with my full knowledge and consent. I hereby certify that, to the best of my knowledge, the information herein is correct and true. I request that a work permit be issued for the above named minor.

Signature of Parent or Guardian

Date

Directions for the Issuing Officer

1. Verify the minor has signed and dated the correct and true statement below.

I hereby certify that, to the best of my knowledge, the information herein is correct and true.

Signature of Minor

Date

Control Number

2. Do not accept an incomplete application.
3. The Division of Labor and Industry requires you retain this application in your file for 3 years from date of issue.

Date of Issue