

Counselor: Flint SID#: 150012345 Grade: 12<sup>th</sup>

STATE OF CALIFORNIA DEPARTMENT OF EDUCATION  
**STATEMENT OF INTENT TO EMPLOY A MINOR AND REQUEST FOR A WORK PERMIT-CERTIFICATE OF AGE**  
 CDE Form B1-1 (Rev. 02-14)

A "STATEMENT OF INTENT TO EMPLOY A MINOR AND REQUEST FOR A WORK PERMIT-CERTIFICATE OF AGE" form (CDE Form B1-1) shall be completed in accordance with California *Education Code* 49162 and 49163 as notification of intent to employ a minor. This form is also a Certificate of Age pursuant to California *Education Code* 49114.

(Print Information)

**Minor's Information**

Sammy Wolf (559)325-1234 12<sup>th</sup>  
 Minor's Name (First and Last) Home Phone Grade

125 N. Spirit Lane Clovis 93619  
 Home Address City Zip Code

01/01/2004 123-45-6789 17 Sammy Wolf  
 Birth Date Social Security Number Age Student's Signature

**School Information**

Clovis East High School (559)327-4000  
 School Name School Phone

2940 Leonard Ave. Clovis 93619  
 School Address City Zip Code

**To be filled in and signed by parent or legal guardian**

*This minor is being employed at the place of work described with my full knowledge and consent. I hereby certify that to the best of my knowledge and belief, the information herein is correct and true.*

Samuel Sr. Wolf Samuel Sr. Wolf 01/25/2022  
 Parent's Name (Print First and Last) Parent's Signature Date

**To be filled in and signed by employer**

Wolf Practice (559)217-1234 John Tall  
 Business Name or Agency of Placement Business Phone Supervisor's Name

1234 N. Sunnyside Clovis 93612  
 Business Address City Zip Code

Employer's Maximum Expected Work Hours: 4 hours per day 20 hours per week

Describe nature of work to be performed: office Assistant

*In compliance with California labor laws, this employee is covered by workers' compensation insurance. This business does not discriminate unlawfully on the basis of race, ethnic background, religion, sex, sexual orientation, color, national origin, ancestry, age, physical handicap, or medical condition. I hereby certify that, to the best of my knowledge, the information herein is correct and true.*

John Tall John Tall 01/26/2022  
 Employer's Name (Print First and Last) Employer's Signature Date

**For authorized work permit issuer use ONLY**

Maximum number of work hours when school is in session:								Maximum number of work hours when school is not in session:							
Mon	Tues	Wed	Thur	Fri	Sat	Sun	Total	Mon	Tues	Wed	Thur	Fri	Sat	Sun	Total
Proof of Minor's Age (Evidence Type)								<b>Check Permit Type:</b>							
								<input type="checkbox"/> Full-time				<input type="checkbox"/> Work Experience			
								<input type="checkbox"/> Restricted				Education, Vocational Education, or Personal Attendant			
								<input type="checkbox"/> General				<input type="checkbox"/> Workability			
Verifying Authority's Name and Title (Print)															
Verifying Authority's Signature															

For more information about child labor laws, contact the U.S. Department of Labor at <http://www.dol.gov/>, and the State of California Department of Industrial Relations, Division of Labor Standards Enforcement at <http://www.dir.ca.gov/DLSE/dlse.html>.