

To apply for a permit to employ an adolescent, complete both the Application and the Safety Checklist for Underage Employees. **Ensure you print off all the copies you require, sign and send both pages** either to the address below or to the fax number provided. If you have any questions about these forms, please call 427-3731 (toll free by dialling 310-0000 and then entering (780) 427-3731).



Under Employment Standards legislation a permit is *not required* to employ an adolescent in the following occupations:

- a) delivery person of small wares for a retail store,
- b) clerk or messenger in an office,
- c) clerk in a retail store, or
- d) delivery person for the distribution of newspapers, flyers or handbills.

"Retail store" includes outlets such as video stores, grocery stores, department stores, convenience stores and farmers markets, but does not include fast food restaurants, movie theatres, ice cream, hot dog and hamburger stands.

For any other occupation a permit from the Director of Employment Standards is required.

A general permit has been issued for adolescent employees in the restaurant and food services industry subject to conditions outlined in the **Permit**. One of the key conditions is a requirement for employers, employees and their parents or guardians to complete a **Safety Checklist**.

For all other occupations adolescent employment may be granted a permit based upon a case-by-case review of the employment conditions. Employers wishing to pursue this option must apply for a permit using the **Application for a Permit to Employ an Adolescent**.

The following restrictions apply whether or not a permit is required from the Director of Employment Standards.

- An adolescent cannot be employed:
 - a) for longer than 2 hours on a day during which the adolescent is required to attend school,
 - b) for longer than 8 hours on a day during which the adolescent is not required to attend school,
 - c) during the period of time from 9:00 p.m. to the following 6:00 a.m., and
 - d) without the written consent of a parent or guardian.
- The employment must not be or have any likelihood of being injurious to the life, health, education or welfare of the adolescent.

Where a permit is required:

The adolescent is prohibited from starting work until the permit has been granted.

Mail or fax the completed form(s) to:

Employment Standards
Alberta Human Resources and Employment
8th Floor, 10808 99 Avenue
Edmonton AB T5K 0G5
Fax: (780) 422-8944

The information you provide on this form is collected under the authority of the Employment Standards Code and under the provisions of the Freedom of Information and Protection of Privacy Act. The information will be used to determine your eligibility for a permit to employ an adolescent. If you have any questions about the collection of this information, you can contact Employment Standards at 427-3731 (toll-free by first dialling 310-0000 and then entering (780) 427-3731).

Employee Information

First Name	Last Name
1	2
Date of Birth (yyyy/mm/dd)	Telephone number (including area code)
3	4

Employer Information

Legal Name	Business Name
6*	7*
Address, including postal code	Telephone number (including area code)
8	9

Workers' Compensation Board Information

WCB Account Number	WCB Industry Code
10*	11
Description of employer's business	
12	

Detailed description of work to be performed by the adolescent

13

Describe the degree of adult supervision that will be provided

14

Proposed rate of pay	Hours of work per day/per week, including daily starting and finishing times	Rest periods per day/per week
15	16	17

List of tools, equipment or products to be used
18

This checklist provides the employer, employee, and parent or guardian with the opportunity to make sure that important workplace safety information, including the employee's rights and responsibilities, is reviewed prior to work beginning.

1. Before starting work, will the employee receive a safety orientation that includes:
 - The potential dangers of the job?
 - The need for and use of safety equipment?
 - Emergency procedures?
 - Work site safety rules?
 - Where to go to get first aid? Yes

2. Before starting work, will the employee be instructed about their rights and responsibilities under the Occupational Health and Safety Act? Specifically, about:
 - The duty to refuse unsafe work?
 - Responsibility of following and complying with work site safe work procedures?
 - Responsibility of working safely and not endangering themselves or others?
 - The duty to raise safety questions with their supervisor; the duty to refuse to perform work that they are not trained to perform; and the protection against disciplinary action provided by the Act if they refuse to perform unsafe work or work for which they have not been trained? Yes

3. Will the employee be under the direct supervision of a competent worker while learning their work? "Direct supervision" involves personal and continuous visual supervision.
 Yes

4. Will the employee be taught safe work practises specific to each of the job tasks the employee is required to perform?
 Yes

5. If special safety equipment is required e.g. safety boots, gloves and eyeglasses, etc. will it be provided along with specific instructions for its use?
 Yes

6. Will the employer provide a copy of this application to the parent or legal guardian of the employee?
 Yes

7. Does the parent or legal guardian of the employee consent to the employee working for the employer?
 Yes

8. Has a written hazard assessment of the work site been done?
 Yes

9. Have the hazards been controlled or eliminated?
 Yes

10. Has the employee been told about the hazards that may affect him or her?
 Yes

Employer

Employer name

Employer representative (if different)

I have completed the checklist items and will ensure that the necessary instruction and training is provided to the employee named on this form before work begins.

Signature

Date

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Employee

Employee name

Complete mailing address

I have read the checklist items and want to be employed by the named employer.

Signature

Date

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Parent or Legal Guardian of the Employee

Name

I have read the checklist items and agree with the responses provided. I have received and reviewed a copy of the employer's written hazard assessment. I consent to the employment of my child by the named employer.

Signature

Date

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Mailing address of parent or guardian (if different from that of the employee)

Telephone number (including area code)