



COMHAIRLE NAN EILEAN SIAR

EMPLOYMENT OF CHILDREN APPLICATION FOR EMPLOYMENT PERMIT

1.

NAME OF CHILD TO BE EMPLOYED	DATE OF BIRTH

ADDRESS AT WHICH CHILD LIVES

SCHOOL ATTENDED	CLASS

NATURE OF EMPLOYMENT (please give full details)

ADDRESS OF PREMISES WHERE CHILD IS TO BE EMPLOYED

HOURS	From	To	HOURS	From	To
(a) Monday			(b) Saturday		
Tuesday			Sunday		
Wednesday			(c) Holiday Period		
Thursday					
Friday					

2. TO BE COMPLETED BY PARENT OR GUARDIAN

As the above mentioned child's parent or guardian, I have been approached by the employer detailed in Section 3 regarding the proposed employment of my child as specified in this application. I have received a copy of the employer's risk assessment and have no objection to the proposed employment. I agree to my child producing a medical certificate if necessary.

NAME

ADDRESS (if different from 1 above)

SIGNED

DATE

3. TO BE COMPLETED BY EMPLOYER

I propose to take the child mentioned in Section 1, into the part-time employment specified and I undertake to adhere to the Council's Byelaws relating to the Employment of Children, a copy of which I have received. I have undertaken a Risk Assessment of the work as specified by the Management of Health and Safety at Work Regulations 1999 and have issued a copy of the Risk Assessment to the child's parent or guardian.

NAME

ADDRESS

EMPLOYER'S SIGNATURE

DATE

4. TO BE COMPLETED BY HEAD TEACHER OF SCHOOL MENTIONED IN 1 ABOVE

As the Headteacher of the School attended by the child detailed in paragraph (1) above, I consider that the proposed employment would/would not* be detrimental to the child receiving full benefit from the education provided for him/her*.

5. FURTHER COMMENTS

SIGNED (Headteacher)

SCHOOL

DATE

NOTES

1. This form should be completed after the attached Byelaws have been read.
2. The form when completed by the parent or guardian and employer should be returned to the Education & Children's Services Department, Council Offices, Sandwick Road, Stornoway, Isle of Lewis HS2 2BW.
3. The Head Teacher should indicate his/her approval of the application by deleting the appropriate phrase in paragraph 4 and signing the form.
4. The form should then be sent to the **Education & Children's Services Department, Council Offices, Sandwick Road, Stornoway, Isle of Lewis HS2 2BW** by the Head Teacher.
5. It should be clearly understood that the prohibited employments specified in the Byelaws are in addition to any other employments prohibited by statute. The attached notes are intended for guidance only and are not to be taken as a comprehensive statement on the legal position regarding the employment of children.

* delete as appropriate