

McKeesport Area School District Work Permit Application

Please complete sections A and B. ***Note that a Parent or Guardian must sign the bottom of the application.**

The **applicant** should return the COMPLETED application to the Main Office of the High School or Main Office at Founder Hall along with proof of age (14 years to 18 years old) and the Work Permit will be issued.

The **applicant** must be present when submitting the application in order to sign the actual work permit.

APPLICATION FOR WORK PERMIT

Date of application _____
Certificate/Permit number _____
Date issued _____

PDE-4565 (1/13)

A. To be completed by issuing officer

Name of minor _____	Sex _____ Color of hair _____ Color of eyes _____	Signature of issuing officer _____
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Any physical work restrictions _____	School district - name and address MCKEESPORT AREA SCHOOL DIST. 1960 EDEN PARK BLVD. MCKEESPORT, PA 15132	
Place of residence _____	Place of birth _____	

Date of birth	Evidence of age accepted and filed. Evidence shall be required in the order designated. Cross out all but the one accepted.								
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; padding: 2px;">Month</td> <td style="width: 33%; padding: 2px;">Day</td> <td style="width: 33%; padding: 2px;">Year</td> </tr> <tr> <td style="height: 30px;"></td> <td></td> <td></td> </tr> </table>	Month	Day	Year				a. Transcript of birth certificate	b. Baptismal certificate or transcript	c. Passport
Month	Day	Year							
	d. Other documentary evidence	e. Affidavit of parent or guardian accompanied by physician's statement of opinion as to the age of the minor							

B. To be completed by parent or guardian, unless minor is a high school graduate (please attach proof of graduation)

Signature of parent, guardian or legal custodian* _____	Name and address of parent, guardian or legal custodian _____
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Commonwealth of Pennsylvania - Department of Education

*In lieu of a signature under clause (B), the applicant may execute a statement before a notary public or other person authorized to administer oaths attesting to the accuracy of the facts set forth in the application on a form prescribed by the department. The statement shall be attached to the application.