

CHILD LABOR LAW CERTIFICATION FOR VOLUNTEERS AND EMPLOYEES UNDER AGE 18

PERSONAL INFORMATION

Name of Minor:	المائط الم	Look
	Middle	Last
Z# (If applicable):		
Position Title:		
DEPARTMENT INFORMATION		
Department Name:		
Department Contact:		
Name	Telephone Number	
CERTIFICATION		
I certify that I have reviewed the assigne the minor is in compliance with the prov Labor and Florida Child Labor Law websit and restrictions as it pertains to this emp	isions and restrictions listed in the tes. I also will ensure ongoing co	ne following US Department of
Department of Labor Age Require	ments	
Florida's Child Labor Law		
APPROVALS		
Supervisor:		
Signature	Name Typed	Date
Director/Dean/VP:		
Signature	Name Typed	Date