

Home Study Program - Employment Certificate

Effective July 1, 2015.

Pursuant to HB 283 (2013) and HB 366 (2015), the Georgia Department of Labor (GDOL) is initiating the following procedure for students between the ages of 12 and 15 years and who are participants of a Home Study Program. **All applications must be completed online, and required documents must be submitted to GDOL electronically by fax** (for the Employment Certification for Minors Under 16).

****Effective July 1, 2015, with the exception of minors employed in entertainment, work permits are only required for minors aged 15 years and younger.**

1. Parent(s)/guardian or Minor completes Section A and Employer completes Section B of the online Employment Certification for Minors Under Age 16. **This online certification form must be completed fully online, but will not be processed until GDOL receives the documents requested in paragraph 2.**
2. Parent/guardian submits to GDOL a copy of the following:
 - Certified birth certificate of the minor child; and either
 - Department of Education Declaration of Intent to Utilize a Home Study Program; or
 - GDOL Home Study Program Students - Declaration for Employment Certificate form
3. GDOL will review all submitted documents for compliance. If the submitted documents are approved, GDOL will:
 - Complete Section C of the online Work Permit; and
 - Provide parent with a completed copy of the Work Permit via email or fax
4. Documents required must be:
 - Faxed to 404 232-3264

GEORGIA DEPARTMENT OF LABOR

148 ANDREW YOUNG INTERNATIONAL BLVD., NE • ATLANTA, GEORGIA 30303-1751

Home Study Program - Declaration for Employment Certificate

Names of Student(s) Applying for Employment Certificate

Student's Name: _____

Street Address: _____ City/State/Zip: _____

Last 4 digits of Social Security Number: _____ Date of Birth _____

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Street Address: _____ City/State/Zip: _____

Last 4 digits of Social Security Number: _____ Date of Birth _____

Student's Name: _____

Street Address: _____ City/State/Zip: _____

Last 4 digits of Social Security Number: _____ Date of Birth _____

Guardian or Parent Affirmation

I, the undersigned, hereby affirm, by checking the items below, that:

the above named child (ren) are presently participating in a full time home study program as set forth in the Georgia Code.

I am the (circle one) parent or lawful guardian of the above named child(ren).

the date of birth of the child(ren) is true and correct as shown on this document and Section A of the Employment Certificate for Minors Under Age 16.

I hereby certify that the above information is true and correct. False certification is a violation of O.C.G.A. § 34-2-13 and you may be further subject to other state and federal penalties.

Signature: _____

Date: _____

Print Name: _____

Address: _____

City/State/Zip: _____

County: _____

Email Address: _____

Phone Number: _____