

State of Michigan  
 Combined Offer of Employment and Work Permit/Age Certificate  
 CA-6 for minors UNDER 16 years of age

Employer Information:

- The employer must have a completed work permit form on file before a minor begins work.
- The employer must always provide competent adult supervision.
- The employer of the minor must comply with federal, state, and local laws and regulations including nondiscrimination against any applicant or employee because of race, color, religion, national origin or ancestry, age, gender, height, weight, marital status, or disability.
- The employer must return the work permit to the issuing officer upon termination of the minor's employment.

Directions: Please type or print using an ink pen. See back of this form for summary of requirements.

Section I: To be Completed by Minor Applicant

|                                                                                                                                                                                           |                               |                                                  |                                     |                                                                                                                                                  |      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|------|
| Name of Minor:                                                                                                                                                                            |                               | Address:                                         |                                     | City:                                                                                                                                            | ZIP: |
| Age:                                                                                                                                                                                      | Date of Birth Month/Day/Year: | Last Four Digits of Social Security Number:      | Contact Telephone Number for Minor: | Application Submitted Electronically: <input type="checkbox"/> Yes <input type="checkbox"/> No<br>If yes, provide email to return approved form: |      |
| Name of School (present or last attended):                                                                                                                                                |                               | Address:                                         |                                     | City:                                                                                                                                            | ZIP: |
| Last Grade Completed:                                                                                                                                                                     |                               | Type of Business (i.e. fast food, retail sales): |                                     |                                                                                                                                                  |      |
| School Status (check one): <input type="checkbox"/> in school <input type="checkbox"/> home schooled <input type="checkbox"/> online/cyber/virtual <input type="checkbox"/> Not Attending |                               | Parent/Guardian Email Address (optional):        |                                     |                                                                                                                                                  |      |
| Name of Parent/Guardian (circle one):                                                                                                                                                     |                               | Parent/Guardian Telephone:                       |                                     |                                                                                                                                                  |      |

Section II: To be Completed by the Employer - Offer of Employment

|                                   |                               |                                            |                          |                                      |
|-----------------------------------|-------------------------------|--------------------------------------------|--------------------------|--------------------------------------|
| Name of Business:                 | Address:                      |                                            | City:                    | ZIP:                                 |
| Dewitt District Library           | 13101 Schavey Rd.             |                                            | Dewitt                   | 48820                                |
| Earliest Starting Time a.m./p.m.: | Latest Ending Time a.m./p.m.: | Hours per Day:                             | Number of Days per Week: | Total Hours of Employment per Week:  |
| 10 AM                             | 8 PM                          | no more than 6                             | Not more than 6 days     | No more than                         |
| Applicant's Job Title:            | Hourly Wage:                  | Job Duties/Tasks to be Performed by Minor: |                          | Equipment/Tools to be Used by Minor: |
| Volunteer                         | 0                             | Summer Reading Program Assistance          |                          |                                      |
| Signature of Employer:            | Title:                        |                                            | Telephone:               | Date:                                |
| (x) <i>Doni Hitting</i>           | Librarian                     |                                            | 517-669-3156             |                                      |

Section III: To be Completed by School's Issuing Officer - Must be Signed by the Issuing Officer to be Valid

|                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                |                                                                                                                                                                    |                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|
| This is to certify that:<br>(1) this form was properly completed,<br>(2) listed job duties are compliant with state and federal laws and regulations,<br>(3) listed hours are compliant with state and federal laws and regulations,<br>(4) this form was signed by employer,<br>(5) I authorize the issuance of this work permit. | Evidence of Age Confirmed by (issuing officer checks one):                                                                                                                     |                                                                                                                                                                    | Number of Hours in School Per Week When School is in Session: |
|                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Birth Certificate<br><input type="checkbox"/> Driver's License<br><input type="checkbox"/> School Record<br><input type="checkbox"/> Other (describe) | <input type="checkbox"/> Certificate of Arrival in the U.S.<br><input type="checkbox"/> Hospital Record of Birth<br><input type="checkbox"/> Baptismal Certificate |                                                               |
| Name of School District:                                                                                                                                                                                                                                                                                                           | Printed Name of Issuing Officer:                                                                                                                                               |                                                                                                                                                                    | Title:                                                        |
| Address:                                                                                                                                                                                                                                                                                                                           | Signature of Issuing Officer:                                                                                                                                                  |                                                                                                                                                                    | Issue Date:                                                   |
| City, State, ZIP:                                                                                                                                                                                                                                                                                                                  | (x)                                                                                                                                                                            |                                                                                                                                                                    |                                                               |
| Telephone Number:                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                |                                                                                                                                                                    |                                                               |

## Summary of Requirements CA-6 MICHIGAN WORK PERMIT AND AGE CERTIFICATE

**Who Needs a CA-6 Work Permit?** A minor who is 14 to 15 years of age who are not specifically exempted and minors 11-13 employed in certain occupations. This completed form permits a minor to be employed only by the employer and at the location listed in Section II. CA-6 Work Permits are valid until a minor turns 18 years of age or graduates as long as the minor works for the same employer. Home schooled students must be issued a work permit from an authorized issuing officer.

**Who Issues the Work Permit?** The issuing officer is the chief administrator of a school district, intermediate school district, public school academy, or nonpublic school, or a person authorized by that chief administrator, in writing, to act on his/her behalf. The work permit may be issued by the school the minor attends or the school district where the minor resides or will be employed.

**Employment of Minors:** A person under 18 years of age shall not be employed in, about, or in connection with an occupation which is hazardous or injurious to the minor's health or personal well-being or which is contrary to standards established by state and federal acts, e.g., construction, slicers, motor vehicle operation, power-driven machinery. The minimum age for employment is 14 years except that a minor 11 years of age or older may be employed as a golf or bridge caddy or youth athletic program referee and a minor 13 years of age or older may be employed in some farming occupations or as a trap-setter. Adult supervision is required.

### Instructions for Completing and Issuing:

1. The Minor completes Section I of the CA-6 form.
2. The prospective Employer completes Section II.
3. The Issuing Officer verifies the age of Minor using the best available evidence and ensures compliance with state and federal laws and regulations.
4. The Work Permit is issued by the Issuing Officer signing and dating the form in Section III.
5. The Issuing Officer maintains a copy for the school file.
6. The Minor returns the completed form to the Employer before beginning work.

The failure or refusal to issue a work permit by the school may be appealed by the minor in accordance with Public Act. 306 of 1969.

### Employer's Responsibilities:

- Must have a completed work permit form maintained at the minor's worksite before a minor begins work.
- Must always provide competent adult supervision.
- Must comply with federal, state, and local laws and regulations including nondiscrimination against any applicant or employee because of race, color, religion, national origin or ancestry, age, gender, height, weight, marital status, or disability.
- Records required by Public Act 90 of 1978, as amended, must be maintained, and made available for inspection by an authorized department representative.
- Must return the work permit to the issuing officer upon termination of the minor's employment.
- Must post required workplace posters at worksite; Michigan Wage and Hour posters may be downloaded at [www.michigan.gov/wagehour](http://www.michigan.gov/wagehour).

**Issuing Officer's Responsibilities:** A copy of the CA-6 shall be filed in the minor's permanent school file. Work permits shall not be issued if the work is hazardous, information is incomplete, or if the minor's employment is in violation of state or federal laws and regulations.

### Hours of Work Covered by Federal Law (business gross annual sales exceed \$500,000 or interstate commerce):

Minors 14 and 15 years of age may work:

1. 3 hours a day while school is in session; 8 hours a day on non-school days.
2. 40 hours in a non-school week; 18 hours in a school week.
3. Not before 7:00 a.m., only after school and only until 7:00 p.m., while school is in session.
4. From 7:00 a.m. until 9:00 p.m. during school summer vacation (June 1 - Labor Day).

### Hours of Work Covered by State Law: Minors under 16 years of age may work:

1. 6 days in 1 week.
2. A weekly average of 8 hours per day.
3. 10 hours in one day.
4. 48 hours in 1 week, school and work combined.
5. Not more than 5 hours continuously without a 30-minute uninterrupted meal or rest period.
6. Between 7:00 a.m. and 9:00 p.m., but not during school hours.

### The stricter standard between state and federal law must be followed.

**Revocation of Permit:** A permit may be revoked by the school issuing officer if: (1) poor school attendance results in a level of schoolwork lower than that prior to beginning employment or (2) the Michigan Department of Labor and Economic Opportunity/U. S. Department of Labor informs the school of an employer's violations of state or federal laws or regulations. Any minor who has a permit revoked shall be informed of the appeal process by the school.