Return completed form to: DIR/DLSE – Minors Permit P.O. Box 420603 San Francisco, CA 94142

APPLICATION FOR EXTENSION OF MINOR'S WORK HOURS IN AGRICULTURAL PACKING PLANTS

Pequester's name:	• • • • • • • • • • • • • • • • • • • •
Requester's name:	n name
Address:	
Street	
	, CA Zip Code
City	Zip Code
of this request:	to ten (10) hours per day and provide the following information in support
• Number of employees for whom exemption is reques	
• Dates for which extension is requested: From	om: To: (mm/dd/yyyy)
	(mm/dd/yyyy) (mm/dd/yyyy
Describe the work activities the minors will be expected	l to perform:
F- 1.'. 1 4 1 1 6 1 11 4 4 .'.1	
Explain how the work to be performed will not material	ly affect the welfare or safety of the minor:
Explain how the exemption, if not approved, will work	an undue hardship on business:
I (We) certify to the following:	
, ,	ors' work hours occur exclusively during the peak hours season for the s);
 That minors work duties during the extended work aforementioned crop(s); 	rk hours shall be limited to work upon or directly related to
That all information contained in this application statements contained herein are grounds for the in	on days when school for the minors' school district is not in session; and, a is true and correct. It is understood that any falsity in or abrogation of mmediate revocation of the extension and will subject all responsible from the violation of child labor laws that would result if no extension had
Dated:	Requester Name (printed) and Title or Position
	Requester Name (printed) and Title or Position
	Signature of Requester
	Digitature of Requester

POST IN CONSPICUOUS PLACE

(Remove When Permit for Exemption is Received)