

**Employment Standards
DEPARTMENT OF EDUCATION, CULTURE AND
EMPLOYMENT / G.N.W.T.**

P.O. Box 1320, Yellowknife, NT. X1A 2L9
Phone: (867) 767-9351 Option 3 Fax: (867) 873-0483

APPLICATION FOR YOUTH EMPLOYMENT

A youth means a person 16 years of age or younger.

Please complete this application in as much detail as possible. If extra space is required please attach additional sheets. Ensure that approval is granted before the youth begins work.

Employers Information:

Name of Business

Type of Business

Address

Phone Number: _____ Fax Number: _____

Contact Person: _____ Title: _____

(Please print)

Youth Information:

Name

Address

Date of Birth: _____

S.I.N. #: _____

Employment Start Date: _____ End Date: _____

Youth Job Particulars

Job Title: _____

Expected Hours of Work - Per day _____ Per Week _____

Duties: _____

Supervised By: Name: _____ Title: _____
(Please Print)

Tools to be used: _____

Safety Equipment to be used: _____

Training Provided: _____

Parent/Guardian Information

Name of Parent or Legal Guardian (Please Print)

Address

Phone Contact Numbers: (Work) _____ (Home) _____

Parent or Guardian Signature/Consent:

Date: _____

NOTE: SUPERVISION OF THE YOUTH IS THE RESPONSIBILITY OF THE EMPLOYER. THE YOUTH IS NOT TO BE PERMITTED TO WORK IN HAZARDOUS AREAS WHERE THERE IS A POSSIBILITY OF INJURY.

Application Completed By

Date Submitted