

## Minor Work Variance Application for Teen Workers 16 — 17 years old

Employment Standards Program PO Box 44510

Olympia WA 98504-4510

Email: <u>TeenSafety@Lni.wa.gov</u>

Fax: 360-902-5300 Phone: 360-902-5316 Employers: Use this form if you are asking L&I to make a temporary exception to state rules limiting teen work hours in **agriculture** (<u>WAC 296-131-140</u>) and in **non-agricultural** jobs (<u>WAC 296-125-0600</u>).

Important: Before you send in this application, you must have a current minor work permit endorsement on your Washington business license to cover the duration of your request. To apply, go to:

http://bls.dor.wa.gov/minorworkpermit.aspx.

In order for us to process this application, it must be completed in full. The affected minor employee and parent/legal guardian must sign the application. L&I can't approve a variance if it conflicts with US federal child labor laws. For more information, call the US Dept. of Labor at 866-487-9243.

<b>Employer Information</b>										
Business Name	Corporation N	Corporation Name								
Type of Business & Products Manufactured or Services Re	ndered Contact Name	Contact Name								
Mailing Address	City	State Zip Code								
Location Address (Physical location where teen will be world	king) City	State	Zip Code							
Contact Email	Contact Phon	Contact Phone Number								
Teen Worker Information	VAC 296-131-120)	☐ Non-agriculture (\)	WAC 296-125-027)							
Teen Name	Birthdate									
Description of Variance Request (A 'Minor Varian	nce' is a temporary ex	ception to state rules lim	niting teen work hours)							
2. Explain your good cause reason for requesting this variance. Attach additional pages if needed.										
3. Is the Minor? Home schooled: ☐ Yes ☐ No										
4. Are noise exposure readings above 85 decibels? ☐ Yes ☐ No If yes, attach Noise Exposure Assessment										
Signatures										
Print Name of Employer Representative Sign	nature of Employer Rep	resentative	Date							
Print Name of Minor Sign	nature of Minor		Date							
Print Name of Parent/Legal Guardian Sign	nature of Parent/Legal (	of Parent/Legal Guardian Date								



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## **Employer Request for Additional Work Hours**

Your Business Name	Corp	oration Name									
Washington Unified Business	hington Unified Business Identifier (UBI) Location ID (Last 4 Digits) For What Time Period Are You Requesting This Variance? (Date to Date)										
Exceptions from the rules covering hours of work for non-Agricultural only:											
Is the minor: Married? A parent? A graduate with thei	Yes I	No Emancip	ated under \	ited college co Vashington Sta s □ No		Yes No					
If you checked "Yes" for any one of the options above, the minor is exempt from "school week" hours of work limits and may work the "non-school week" hours of work during the school year. Employer must obtain a copy of documentation for proof and recordkeeping purposes.											
Indicate the work hours	you want L&I t	o permit for the I	minor.								
School	Hour	s per Day	Hours	per Week	Days per Week		Start	Time	Quittin	Quitting Time	
Week	Max	Your	Max	Your	Max	Your	Earliest	Your	Latest	Your	

	School	Hours per Day		Hours per Week		Days per Week		Start Time		Quitting Time	
Agriculture \	Week	Max	Your	Max	Your	Max	Your	Earliest	Your	Latest	Your
		allowed	request	allowed	request	allowed	request	allowed	request	allowed	request
	School Weeks	4 hours	hrs	20 hours	hrs	6 days	days	7:00 am	am	10:00 pm	pm
		8 hours (Fri – Sun)	hrs							Midnight ( <i>Fri</i> – <i>Sat</i> )	
	Non- School Weeks	8 hours	hrs	48 hours	hrs	6 days	days	5:00 am	am	Midnight	

	School Week	Hours per Day		Hours per Week		Days per Week		Start Time		Quitting Time	
Agriculture		Max	Your	Max	Your	Max	Your	Earliest	Your	Latest	Your
	VVCCK	allowed	request	allowed	request	allowed	request	allowed	request	allowed	request
	School Weeks	4 hours	hrs	28 hours	hrs	6 days	days	5:00 am	am	10 pm	pm
	Non- School Weeks	10 hours	hrs	50 hours	hrs	6 days	days	5:00 am	am	10 pm	

Questions? Go to: www.Lni.wa.gov/TeenWorkers Email: TeenSafety@Lni.wa.gov Call: 360-902-5316