STATE OF NEW HAMPSHIRE DEPARTMENT OF LABOR

PO BOX 2076 CONCORD, NH 03302-2076

EMPLOYER'S REQUEST FOR CHILD LABOR

Please issue a NH Youth Employment Certificate to:		
NAME OF MINOR	SO	C. SEC. NUMBER (optional)
AGE	DATE OF BIRTH	SEX
That he/she may be legally er amended, by	nployed, in accordance with Revised	Statutes Annotated 276-A as
(SHOW CORPORATION O	R TRADE NAME, IF ANY)	(FED. ID #)
STREET & NUMBER	CITY, STATE, ZIP	TEL. #
	INDUSTRY OF EMPLOYER	
NAT	URE OF EMPLOYMENT – BE SPE	CIFIC
* *	or must present a Birth Certificate or d the certificate will be issued there.	
	Employer's	s Signature/Telephone Number