



MINOOKA COMMUNITY HIGH SCHOOL DISTRICT # 111

Request for Work Permit (for current MCHS students only)

REQUEST FOR WORK PERMIT

BRING BACK TO MRS. KRAKOWSKI IN THE COUNSELOR'S OFFICE
AFTER YOU HAVE SECURED A JOB WITH THE FOLLOWING ITEMS:
(ALLOW 48 HOURS FOR PROCESSING)

1. Letter of Intent from Company
2. Copy of Birth Certificate
3. Copy of Social Security Card

Complete the following (PLEASE PRINT)

Student Social Security # _____

Name _____

Street Address _____

City, State, Zip _____

Place of Birth: City _____ State _____ County _____

Employer/Company Name _____

Employer/Company Phone _____

Employer's Address _____

Type of Industry _____ Your Position _____

Is this summer work only? Yes ___ No ___ Is liquor served? Yes ___ No ___

Parent/Guardian Name _____

Address _____

I give permission for _____ to work at the above
named business.

Date

Parent/Guardian Signature