NEW JERSEY DEPARTMENT OF EDUCATION

Date Printed: ____ Date(s) of previously issued certificates (if applicable): A300 Combined Certification Form CEE Non-Hazardous Occupation Paid Structured Learning By

Cooperative Education Experience (CEE) - Hazardous Occupation	CEE - Non-Hazardous Occupation Paid Structured Learning Experience						
A. Minor's Personal Information							
First Name M.I. Last Name	Social Security No.						
Street Address (Line 1) Floor/Apt. No. (Line 2)	Date of Birth Age City of Birth						
City State Zip (Code County of Birth State/Country of Birth						
Telephone No. Cell/Alternate No.	Male Height Hair Color						
	Female Weight Eye Color						
Parent/Guardian First Name Parent/Guardian Last Name	Distinguishing Facial Marks (if applicable)						
Parent/Guardian Address (if different than minor's address) Floot/Apt. No. (Lin	I hereby authorize the employment of my child as specified below under						
ty State Zip Code Employment Information.							
Parent/Guardian Telephone No. Alternate Telephone No.	Signature of Parent/Guardian Date						
B. Employn	nent Information						
Employer Business Name	Type of Business/Industry						
Street Address (where minor will be employed) Floor/Suite (Line 2)	Minor's Job Title (Be specific)						
City State Zip C	Code Is liquor sold on the premises? Yes No						
	If Yes, are the entire premises licensed? Yes No						
Contact Person Name	If No, describe what areas of the premises are licensed, including any						
	outside grounds:						
Telephone No. Alternate Telephone No.							
Minor's Hours of Work (Provide daily hours and/or start and end times)	Promise of Employment: I have offered employment to the above named minor for the hours stated. I understand that these hours may be						
	flexible but may not exceed the number of hours permitted by law						
Mon Tues Wed Thurs Fri							
Sat Sun Total Hours for Week:	,						
Wages: Per Hour Weekly Other	Signature of Employer Date						
C. Physician's Certification (to be completed by licensed physician): I here and I designate the minor's physical qualifications regarding the above promise of e	by certify that I have examined the above named minor on						
and I designate the minor's physical qualifications regarding the above promise of e	mployment as: (Date)						
Physically Qualified Physically Qualified with the following limitation	S						
Signature of Doctor Date Address							
D. Proof of Age (for Issuing Officer): I have examined the proof of age submitt	ed by the above named minor which was in the form of (select one):						
	umentary proof in existence for at least one year (specify):						
Affidavit of Parent/Guardian together with 1) physician's statement of opinion as to age of minor, and 2) school record of age and the above date of birth							
E. School Record (to be completed by school that the minor attends)	F. Issuing Officer Certification						
School District County Hanover Park Regional High School District Morris	School District County Hanover Park Regional High School District Morris						
Name of School School District Address							
Hanover Park High School	75 Mount Pleasant Avenue, East Hanover, NJ 07936						
School Address	phone No.						
63 Mount Pleasant Avenue, East Hanover, NJ 07936	(9 ⁷ 3) 887-0300						
Last Grade Completed	Regular Employment Certificate						
Zaci Grade Compresses	☐ Vacation Employment Certificate (summer & other school vacations)						
The above named minor attends school in this district and has completed the work	Age Certificate (issued to persons 18 to 21 years of age) Age:						
of the above grade. To the best of my knowledge the minor can do the work							
proposed without impairment of progress in school.							
	Signature of Minor Date						
Signature of Principal Date							
organiare of Frincipal Date	Signature of Issuing Officer Date of Issue Certificate No.						
	Signature of mounty officer Date of Bate Certificate 110.						

INSTRUCTIONS FOR A300 COMBINED CERTIFICATION FORM

- 1. Employment Information (section B) After you have completed your personal information (section A), bring your certification form to the employer. The employer completes the Employment Information and signs and dates the Promise of Employment. If any of the employment details have been pre-filled and are incorrect, the employer must cross out the incorrect information and enter, initial and date the corrections.
- 2. Physician's Certification (section C) The school district is responsible for performing the physical examination at no cost to you or your parents. A school physical (including a sports physical) performed during freshman year is good for all four years of high school (unless the school district policy specifies more frequent physicals).
 - If your parent/guardian prefers that you be examined by a doctor other than the one employed by the school district, you may do so at your parent/guardian's expense. A minor is not required to obtain a physical if the parent/guardian objects (in writing) based on their religious beliefs and practices.
- 3. **Proof of Age** (section D) If the school does not have a copy on file, you may be asked to provide a birth certificate, passport, baptismal certificate or other identification documentation to the School Issuing Officer.
- 4. Parent/Guardian Authorization (section A) Your parent/guardian must indicate his/her authorization of your employment as specified in the Employment Information by signing and dating the Parent/Guardian authorization.
- 5. School Record/Issuing Officer Certification (sections E & F) Bring the completed certification form to your school district. A designated school official will review the form and issue the working papers only after being satisfied that the working conditions and hours will not interfere with your education or damage your health. The official may refuse to issue working papers if such refusal would be in your best interest.

IMPORTANT INFORMATION

Hours of Work - 14 & 15 Year Olds

- no more than 3 hours a day on a school day
- no more than 18 hours a week during a school week
- may not work before 7:00 am or after 7:00 pm during the school year
- summer vacation: may work up to 8 hours a day, 40 hours a week, and may work up to 9:00 pm with written parental permission (which must be on file with the employer)

Hours of Work - 16 & 17 Year Olds

- · no more than 8 hours a day
- no more than 40 hours a week
- may not work before 6:00 am or after 11:00 pm
 Exception: may work after 11:00 pm (up to 3 am provided work begins before 11 pm) during regular school vacation and when there is no school the next day with written parental permission (which must be on file with the employer)

Hours of Work - All Minors

- no more than 6 consecutive days
- may not work more than 5 continuous hours without at least a 30-minute meal break

Hours of Work - School-Sponsored Cooperative Education Experiences, Apprenticeships and Paid Structured Learning Experiences - Training site experiences may not exceed five hours on any day that school is in session nor may the combination of school and work exceed eight hours on any day that school is in session.

Prohibited Work— Certain potentially hazardous jobs are prohibited for minors based on the age of the minor. For a complete list of prohibited occupations, visit the Department of Labor and Workforce Development's website at www.nj.gov/labor and click on Wage & Hour.

www.nj.gov/education - New Jersey Department of Education www.nj.gov/labor (click on Wage & Hour) — New Jersey Department of Labor and Workforce

A300 (R-9-2012) New Jersey Department of Education

LISTS OF ACCEPTABLE DOCUMENTS All documents must be UNEXPIRED

Employees may present one selection from List A or a combination of one selection from List B and one selection from List C.

	LIST A	- - -	LIST B		LIST C .	
	Documents that Establish Both Identity and Employment Authorization		Documents that Establish Identity	ID	Documents that Establish Employment Authorization	
2.	U.S. Passport or U.S. Passport Card Permanent Resident Card or Alten Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary		L. Driver's license or ID card Issued by a State or cutlying possession of the United States provided it contains a pholograph or information such as name, date of birth, gender, height, eye color, and address	(1)	A Social Security Account Number card, unless the card includes one of the following restrictions: (1) NOT VALID FOR EMPLOYMENT (2) VALID FOR WORK ONLY WITH INS AUTHORIZATION	
4.	I-551 printed notation on a machine- readable immigrant visa Employment Authorization Document		 ID card issued by federal, state or local- government agencies or entitles, provided it contains a photograph or information such as name, date or birth, 	2.	(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of Birth Abroad Issued	
5	that contains a photograph (Form 1-766). For a nonimmigrant allen authorized		gender, height, eye color, and address School ID card with a photograph	3.	by the Department of State (Form FS-545) Certification of Report of Birth	
1 6	lo Work for a specific employer because of his or her status:		1, Voter's registration card		issued by the Department of State (Form DS-1350)	
	a. Foreign passport, and b. Form I-94 or Form I-94A that has the following: (1) The same name as the passport;	7	U.S. Military card or draft record Military dependent's ID card U.S. Coast Guard Merchant Mariner Card	4,	Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal	
	and (2) An endorsement of the allen's		. Naltve American tribal document	5,	Native American tribal document	
	nonlimmigrant status as long as that period of endorsement has	9), Driver's license Issued by a Canadian government authority		U.S. Citizen ID Card (Form I-197)	
not yet ex proposed contlict wi	not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.		For persons under age 18 who are unable to present a document listed above:	7.	7. Identification Card for Use of Resident Citizen in the United States (Form I-179)	
6.	Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A Indicating bonimmigrant admission under the Compact of Free Association Between	1	O. School record or report card O. Clinic, doctor, or hospital record Day-care or nursery school record	8,	Employment authorization document issued by the Department of Homeland Security	
•	the United States and the FSM or RMI					

Mustrations of many of these documents appear in Part 8 of the Handbook for Employers (M-274).

Refer to Section 2 of the Instructions, titled "Employer or Authorized Representative Review and Verification," for mere information about acceptable receipts.