

## Child Labor Program Permit Application

Phone# 800.226.2536 or 850.488.3131 (press option 1 for Child Labor)

Email Application to: [Childlabor.Entertainment@myfloridalicense.com](mailto:Childlabor.Entertainment@myfloridalicense.com)

**Please allow processing time by submitting your application a week or no later than 3 business days**

### INSTRUCTIONS

#### Application for Permit to Hire Minors by the Entertainment Industry

1. **EMPLOYER:** An employer can be, but is not limited to, the production company, the motion picture or recording studio company, an advertising company, the company whose product is being advertised, or casting company.
  - 1a. FEIN#: Federal Employer Identification Number.
2. **ADDRESS:** Permanent address where the employer can be reached during postproduction activities.
3. **CITY, STATE, ZIP CODE:** City, state, zip code of the employer.
4. **NAME OF EMPLOYER CONTACT PERSON AND PERMANENT PHONE NUMBER:** Name and phone number of employer contact person.
5. **CHILD LABOR COORDINATOR/CONTACT PERSON:** An individual that is on the set where minors are employed or in each touring company which includes minor employees, to act as Coordinator of Child Labor. The coordinator shall respond to all communications from the Child Labor office regarding the employment of minors. This person should be knowledgeable and available, can research inquiries, and submit written or verbal information to the Child Labor office staff. The phone and fax numbers must be for the Child Labor Coordinator/Contact person.
6. **TEMPORARY ADDRESS:** Provide a temporary Florida production address, if shooting more than one day.
7. **TYPE OF PRODUCTION:** Check box that best describes the type of production. If type of production is not listed, check "Other" and explain. Use an additional sheet(s), if necessary.
8. **TITLE OF PRODUCTION:** Indicate production title, i.e., working title.
9. **LIST EXACT LOCATIONS:** Include the street address (es) where the minors will be employed. Not all locations will have an address. The following are examples of locations for public areas:
  - a. In a street: "1000 block of 6<sup>th</sup> Street, Orlando
  - b. At a park; "St. Marks Wildlife Refuge off Highway 98, just east of the town of St. Marks, near the lighthouse".
10. **ANTICIPATED START DATE:** Planned starting date. Contact the Child Labor office with any changes.
11. **ANTICIPATED END DATE:** Planned ending date. Contact the Child Labor office with any changes.
12. **PARENTAL NOTICE:** Employers of minors in the entertainment industry shall notify the minor's parent(s), guardian, or chaperone, of the terms and conditions of employment, including the activities required by the minor, the place and duration of location work, and the names of the producer and stunt coordinator (if applicable).
13. **SCHOOL NOTICE:** Indicate if the arrangements have been made for missed school if minors are working during public school hours.
14. **SAFETY PROCEDURES:** Explain the safety procedures in place for minor(s).
15. **DESCRIBE IN DETAIL WHAT TASKS WILL BE PERFORMED BY EACH MINOR:** Provide a detailed work description of each employed minor. Storyboards or scripts may be submitted, if available.
16. **NUMBER OF MINORS TO BE EMPLOYED:** Planned number of minors according to the script.
17. **WAIVER/NARRATIVE JUSTIFICATION:** Waivers may be issued by the Child Labor office when there is a Permit-to-Hire request that exceeds the limits of the entertainment regulations. A narrative justification must be submitted whenever a waiver is requested and for long periods of employment that require the minor to travel away from their school or home. Appropriate justification should address, "how the health, education, and welfare of the minor will not be adversely affected" by the request, i.e., tutors, housing, chaperone, and resting periods/areas issues.
18. **TIME LIMITATIONS:** Minors are limited to work no earlier than 7:00 a.m. and/or no later than 11:30 p.m.; and may not work more than six consecutive days. Rule 61L, F.A.C., also contains, by age, group, the number of hours minors can work, and the number of hours minors can be at the place of employment. A waiver must be requested for any variance in the time limitations.
19. **EMPLOYER SIGNATURE AND DATE:** The employer or his or her designee must sign and date the application. If the application is not signed a permit cannot be issued.

**Department of Business and Professional Regulation  
Child Labor Program**

**APPLICATION AND INSTRUCTIONS FOR PERMIT TO HIRE MINORS  
By The Entertainment Industry**

<b>Final Report Due</b>
<b>Permit Number</b>

DO NOT ABBREVIATE

<b>1. Employer:</b>  1a. FEIN #:	<b>5. Child Labor Coordinator Contact Person Information</b> Name: Phone #: (        ) Fax #: (        ) Email:
<b>2. Permanent Address:</b>	<b>6. Temporary Florida Address including City, and Zip, if shooting more than one day:</b>
<b>3. City, State, Zip Code:</b>	<b>7. Type of Production:      Submit Storyboard or Script</b>  <input type="checkbox"/> Seasonal TV Shows <input type="checkbox"/> Motion Picture <input type="checkbox"/> Commercial <input type="checkbox"/> Live Stage <input type="checkbox"/> Touring Company <input type="checkbox"/> Other (explain)
<b>4. Employer Contact Information</b> Name: Permanent Phone #: (        ) Email:	
<b>8. Title of Production:</b>	
<b>9. List <u>exact</u> location(s) including addresses where minors will be employed. Add extra pages if necessary:</b>	
<b>10. Anticipated Start Date:</b>	<b>11. Anticipated End Date:</b>
<b>12. PARENTAL NOTICE: YES ___ NO ___</b> Has the employer notified the minor's parent (s), guardian, or chaperone, of the terms and conditions of employment, including the activities of the minor?	
<b>13. SCHOOL NOTICE:</b> Have arrangements been made for missed school if minors are working during public school hours? YES ___ NO ___.	
<b>14. SAFETY PROCEDURES: YES ___ NO ___</b> Please explain the safety procedures for your minor(s), to include work description below.	
<b>15. Describe in details minor(s) work description, including safety directives, production <u>start time</u> and production <u>end time</u>. Please submit Storyboards or Script for TV Shows, Commercials, Motion Pictures, Stage Shows, Touring Company, or Other.</b>	

**16. LIST THE NUMBER OF EMPLOYED MINORS AND THE WORK HOURS ` PER AGE GROUP**

AGE	LIST # OF MINORS	LIST WORK HOURS	AGE	LIST # OF MINORS	LIST WORK HOURS
0-5 months			6-8 years old		
6-11 months			9-15 years old		
1 year old			16-17 years old		
2-5 years old					

17. A request that falls within the hour limitations allowed by Rule 61L, F.A.C., and are only a few days in duration require no additional justification or waiver, and only require the Permit to Hire application. If minors are to be employed more hours than allowed by the entertainment rule, or there is need for other variances, a waiver is required (see instructions on the back). Extended periods of employment, and/or travel away from school and home will also require a separate narrative justification to explain "how the health, education, and welfare of the minor will not be adversely affected", and the accommodations being made under these circumstances, i.e., tutors, meals and rest periods/facilities, parent, or chaperone availability. Use a separate sheet for narrative justification.

18. Time Limitations and Waiver Request. If any of the questions are answered with a "yes" a waiver must be requested with a detailed description of the requested waiver. Use section 15 to explain your waiver request (see instructions on page 1 of application or the Entertainment statute).

- Does the workday begin earlier than 7:00 a.m. and/or end later than 11:30 p.m.? YES \_\_\_ NO \_\_\_
- Does the workweek require more than six consecutive workdays? YES \_\_\_ NO \_\_\_
- Does the employed minor(s) require more hours than statutorily allowed? YES \_\_\_ NO \_\_\_

**MEDICAL CARE**

**AUTHORIZATION FOR MEDICAL CARE.** Rule 61L-2.006(3)(B), F.A.C., STATES, "PRIOR TO THE MINOR'S BEGINNING EMPLOYMENT, THE EMPLOYER SHALL OBTAIN WRITTEN AUTHORIZATION FROM THE MINOR'S PARENT(S), GUARDIAN, OR CHAPERONE, TO CONSENT FOR MEDICAL TREATMENT ON BEHALF OF THE MINOR IN CASE OF AN EMERGENCY." (THE CHILD LABOR PROGRAM DOES NOT ISSUE A FORM FOR THIS REQUIREMENT.)

19. The undersigned certifies that the information presented is true and correct to the best of his/her knowledge and that any changes and/or updates to this information will be submitted to this office by phone, fax or email.

\_\_\_\_\_  
Employer Signature

\_\_\_\_\_  
Date

**For Office Use Only**

**Send application and supporting documents to:**  
 FAX: 850.487.4928  
 Email: [childlabor.entertainment@myfloridalicense.com](mailto:childlabor.entertainment@myfloridalicense.com)