Parent/Guardian Consent Form

Young Worker Information

To be presented to the employer who offers the young person a job, with a copy of the Certificate of Completion from the Young Worker Readiness Certificate Course.

Name:		
Address:		
City:	Province:	Postal Code:
Home Telephone:		Cell Telephone:
Date of Birth (dd/mm/yyyy):		
Parent/Guardian's Name:		Telephone Number:
Parent/Guardian's Mailing Addres	s (if different than al	oove):
Employer Information		
Business Name:		
		Postal Code:
Telephone:		
Consent		
I,	, confirm that I am t	he parent/guardian of
This is my written consent for		to be employed by
I certify that the herein stated is tr	rue and correct to the	e best of my knowledge and belief. This consent
can be withdrawn at any time wit	hout notice.	
Printed Name:		
X		
Signature of Parent/Guardian		Date (dd/mm/yyyy):

Employers must keep this written consent as part of the employment records. Parents/guardians should also keep a copy within their records.