STATEMENT OF PROSPECTIVE EMPLOYER

TO WHOM IT MAY CONCERN:

We propose to employ ______________________ as ____________

for _____ hours a day, and ______ days a week.

Is liquor served? ☐ Yes ☐ No Summer work only? ☐ Yes ☐ No

Name of firm: ____

Address of firm: ____

Date: _________ By: ______________________________________
(SIGNATURE OF EMPLOYER/SUPERVISOR)

Employee Address: ____

______________________________ ____________
(SIGNATURE OF PARENT/GUARDIAN) (DATE)

Employer Copy

- -

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