## Written consent about the occupation of a child/teenager under the age of 15 according § 6 JArbSchG to be presented with

Regional Authorities, Health and safety protection and technical security Berlin (LAGetSi) Turmstraße 21, 10559 Berlin

## Parents/Legal Guardian\*

I do herewith agree, that mine/our child

Surname, First Name: .....

Date of birth: .....

Level of School: .....

Address: .....

can participate in the production according to the young persons protection of employment act .

My child has been employed for ..... days this legal year.

I am aware of the conditions of the proposed employment and I agree to my son / daughter being employed.

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Printed name

Signature

Date ....../...../....../

Telephone / mobile .....

\*) I reserve the right to intervene and I undertake to inform the Regional Authorities, Health and safety protection and technical security Berlin about my revocation. As soon as the child gets health problems due to his/her participation in the performance, I am going to withdraw my consent. I accept that information can be gathered at the government office for youth welfare.

## School doctor/Doctor

There are no medical concerns for the employment/participation in the production of the child.

Or: The following medical concerns do not allow an employment of the child.

Printed name Signature and seal of the School doctor/the doctor

Date ...../..../...../

## <u>School</u>

There is – no – reason to interdict the child's employment/participation in the production outside schooldays.

•••••••••••••••••	
Printed name	Signature and seal

Date ....../...../....../

Telephone number .....

\*) If it is not possible to make a judgement, the school is asked to specify it. The Regional Authorities, Health and safety protection and technical security Berlin may possibly contact the school directly.

This statement is only part of the application of the employer to permit child labour according to § 6 of the law for the protection of the youth.