

Student Work Forms CHECKLIST

NEW STUDENT EMPLOYEES

All documents must be completed and signed by the student wanting to work for UCA before being considered for employment

Document 1: Form I-9 – Please complete section 1 on page 1. Documents except for identification can be found on page 2. These documents must be presented in person to Upper Columbia Academy prior to the student beginning employment.

Document 2: Form W-4 – Please note if you would like not to have taxes withheld during the school year, put "EXEMPT" in the space below Sept 4(c). If exempt is selected, a new W4 will be required every February.

Document 3: Payroll Agreement - This is an authorization for crediting student labor to the student's account and withholding tithe, if desired. Please have the student sign, as well as a Parent/Guardian if the student is under 18.

Document 4: Upper Columbia Conference Sick Leave Notification

Document 5: Parent School Authorization (PSA) - per Washington State Dept. of Labor a Parent/ Guardian must sign this authorization for a student under the age of 18 to work during the school year. Additionally, proof of your student age must be obtained for verification purposes (see acceptable documents below). If your student is over 18, you do not need to sign this document.

Notes for PSA:

- The Hours and Work Schedule section--p. 2 is for reference only. You don't need to enter anything on that page unless you need to make changes.
- The Student (Employee) and Parent/Guardian must both sign this form.
- o If your student is going to work for HyMark, you will need to fill out a separate Parent School Authorization Form, Parent/School Authorization (F700-002-000) (wa.gov).
- A separate summer authorization is needed for employment during the summer.

Age Verification Documents for the PSA (must provide one of the following):

- Birth certificate and Social Security card.
- > Driver's license.
- Baptismal record.
- Notarized statement from the parent or legal guardian.

If you have questions on any of the above forms or the work program, please contact the UCA Business Office at business.office@ucaa.org or 509-245-3618.



Employment Eligibility Verification

Department of Homeland Security

U.S. Citizenship and Immigration Services

USCIS Form I-9

OMB No.1615-0047 Expires 07/31/2026

START HERE: Employers must ensure the form instructions are available to employees when completing this form. Employers are liable for failing to comply with the requirements for completing this form. See below and the Instructions.

ANTI-DISCRIMINATION NOTICE: All employees can choose which acceptable documentation to present for Form I-9. Employers cannot ask employees for documentation to verify information in **Section 1**, or specify which acceptable documentation employees must present for **Section 2** or Supplement B, Reverification and Rehire. Treating employees differently based on their citizenship, immigration status, or national origin may be illegal.

,		5 1	,	,		, 3	,	3 , 3
Section 1. Employee day of employment,				ees must compl	ete and sig	n Section 1	of Form I-9 r	no later than the first
Last Name (Family Name)		First Name	(Given Name))	Middle Initial	(if any) Othe	er Last Names Us	sed (if any)
Address (Street Number an	d Name)	A	pt. Number (if	any) City or Town		·	State	ZIP Code
Date of Birth (mm/dd/yyyy)	U.S. Soc	ial Security Number	Emplo	oyee's Email Address	3		Employee	e's Telephone Number
I am aware that federal provides for imprisonr fines for false stateme use of false document connection with the co	nent and/or nts, or the s, in	1. A citizen o	of the United S en national of	,	ee Instruction		s (See page 2 and	d 3 of the instructions.):
this form. I attest, und of perjury, that this inf including my selection	er penalty ormation,	4. A noncitiz	en (other than	Item Numbers 2. a		L authorized to w	ork until (exp. da	te, if any)
attesting to my citizens immigration status, is correct.		USCIS A-Num		ter one of these: Form I-94 Admissio		Foreign P	assport Numbe	r and Country of Issuance
Signature of Employee	1	1			Toda	ay's Date (mm/c	ld/yyyy)	
If a preparer and/or tr	anslator assiste	ed you in completir	ng Section 1,	that person MUST	complete the	Preparer and	or Translator C	ertification on Page 3.
Section 2. Employer business days after the e authorized by the Secreta documentation in the Add	mployee's first	t day of employme cumentation from	ent, and mus List A OR a	their authorized re t physically exami combination of do	epresentativ ne, or exam ocumentatio	e must compl nine consister n from List B	lete and sign S It with an a l terr and List C. Er	ection 2 within three native procedure nter any additional
		List A	OR	Lis	t B	AND		List C
Document Title 1								
Issuing Authority								
Document Number (if any) Expiration Date (if any)								
Document Title 2 (if any)			Add	itional Information	on			
Issuing Authority								
Document Number (if any)								
Expiration Date (if any)								
Document Title 3 (if any)								
Issuing Authority								
Document Number (if any) Expiration Date (if any)								
Expiration Date (ii any)				theck here if you use	ed an alternat	ive procedure a	<u>*</u>	S to examine documents.
Certification: I attest, unde employee, (2) the above-lis best of my knowledge, the	ted documenta	tion appears to be	genuine and	to relate to the emp			neu _{(mm/dd}	ay of Employment l/yyyy):
Last Name, First Name and	Title of Employer	or Authorized Repr	esentative	Signature of Em	ployer or Auth	norized Represe	entative	Today's Date (mm/dd/yyyy)
Employer's Business or Orga Upper Columbia A		a UCA		Business or Organiz Spangle-Wa				<u> </u>

For reverification or rehire, complete Supplement B, Reverification and Rehire on Page 4.

LISTS OF ACCEPTABLE DOCUMENTS

All documents containing an expiration date must be unexpired.

* Documents extended by the issuing authority are considered unexpired.

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

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

LIST A Documents that Establish Both Identity and Employment Authorization	OR	LIST B Documents that Establish Identity AN	LIST C Documents that Establish Employment Authorization
 U.S. Passport or U.S. Passport Card Permanent Resident Card or Alien Registration Receipt Card (Form I-551) Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa Employment Authorization Document that contains a photograph (Form I-766) For an individual temporarily authorized to work for a specific employer because of his or her status or parole: Form I-94 or Form I-94A that has the following: The same name as the passport; and An endorsement of the individual's status or parole as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form. 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 nonimmigrant admission under the Compact of Free Association Between the United States 		 Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address School ID card with a photograph Voter's registration card U.S. Military card or draft record Military dependent's ID card U.S. Coast Guard Merchant Mariner Card Native American tribal document Driver's license issued by a Canadian government authority For persons under age 18 who are unable to present a document listed above: Clinic, doctor, or hospital record Day-care or nursery school record 	 A Social Security Account Number card, unless the card includes one of the following restrictions: NOT VALID FOR EMPLOYMENT VALID FOR WORK ONLY WITH INS AUTHORIZATION VALID FOR WORK ONLY WITH DHS AUTHORIZATION Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240) Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal Native American tribal document U.S. Citizen ID Card (Form I-197) Identification Card for Use of Resident Citizen in the United States (Form I-179) Employment authorization document issued by the Department of Homeland Security For examples, see Section 7 and Section 13 of the M-274 on uscis.gov/i-9-central. The Form I-766, Employment Authorization Document, is a List A, Item Number 4. document, not a List C document.
May be prese		Acceptable Receipts d in lieu of a document listed above for a t For receipt validity dates, see the M-274.	emporary period.
 Receipt for a replacement of a lost, stolen, or damaged List A document. Form I-94 issued to a lawful permanent resident that contains an I-551 stamp and a photograph of the individual. Form I-94 with "RE" notation or refugee stamp issued to a refugee. 	OR	Receipt for a replacement of a lost, stolen, or damaged List B document.	Receipt for a replacement of a lost, stolen, or damaged List C document.

^{*}Refer to the Employment Authorization Extensions page on <u>I-9 Central</u> for more information.

Form I-9 Edition 08/01/23 Page 2 of 4

Employee's Withholding Certificate

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Give Form W-4 to your employer.

OMB No. 1545-0074

Department of the Treasury Your withholding is subject to review by the IRS. Internal Revenue Service Last name (a) First name and middle initial (b) Social security number Step 1: **Enter** Address Does your name match the Personal name on your social security card? If not, to ensure you get Information City or town, state, and ZIP code credit for your earnings. contact SSA at 800-772-1213 or go to www.ssa.gov. Single or Married filing separately Married filing jointly or Qualifying surviving spouse Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.) Complete Steps 2-4 ONLY if they apply to you; otherwise, skip to Step 5. See page 2 for more information on each step, who can claim exemption from withholding, and when to use the estimator at www.irs.gov/W4App. Step 2: Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs. **Multiple Jobs** or Spouse Do only one of the following. Works (a) Use the estimator at www.irs.gov/W4App for most accurate withholding for this step (and Steps 3-4). If you or your spouse have self-employment income, use this option; or (b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below; or (c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is generally more accurate than (b) if pay at the lower paying job is more than half of the pay at the Complete Steps 3-4(b) on Form W-4 for only ONE of these jobs. Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3-4(b) on the Form W-4 for the highest paying job.) Step 3: If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly): Claim Multiply the number of qualifying children under age 17 by \$2,000 \$ **Dependent** Multiply the number of other dependents by \$500 \$ and Other **Credits** Add the amounts above for qualifying children and other dependents. You may add to \$ 3 this the amount of any other credits. Enter the total here Step 4 (a) Other income (not from jobs). If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. (optional): This may include interest, dividends, and retirement income 4(a) |\$ Other **Adjustments** (b) Deductions. If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter 4(b) |\$ (c) Extra withholding. Enter any additional tax you want withheld each pay period . . . 4(c) |\$ **EXEMPT** Step 5: Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete. Sign Here Employee's signature (This form is not valid unless you sign it.) **Date** First date of Employer identification **Employers** Employer's name and address

Upper Columbia Conference dba Upper Columbia Academy

3025 E. Spangle-Waverly Rd, Spangle, WA 99031

Only

employment

91-0617725

number (EIN)

Form W-4 (2024) Page **2**

General Instructions

Section references are to the Internal Revenue Code.

Future Developments

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to www.irs.gov/FormW4.

Purpose of Form

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

Exemption from withholding. You may claim exemption from withholding for 2024 if you meet both of the following conditions: you had no federal income tax liability in 2023 and you expect to have no federal income tax liability in 2024. You had no federal income tax liability in 2023 if (1) your total tax on line 24 on your 2023 Form 1040 or 1040-SR is zero (or less than the sum of lines 27, 28, and 29), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2024 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2025.

Your privacy. Steps 2(c) and 4(a) ask for information regarding income you received from sources other than the job associated with this Form W-4. If you have concerns with providing the information asked for in Step 2(c), you may choose Step 2(b) as an alternative; if you have concerns with providing the information asked for in Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c) as an alternative.

When to use the estimator. Consider using the estimator at *www.irs.gov/W4App* if you:

- 1. Expect to work only part of the year;
- Receive dividends, capital gains, social security, bonuses, or business income, or are subject to the Additional Medicare Tax or Net Investment Income Tax; or
- 3. Prefer the most accurate withholding for multiple job situations.

Self-employment. Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at www.irs.gov/W4App to figure the amount to have withheld.

Nonresident alien. If you're a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Specific Instructions

Step 1(c). Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

Step 2. Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Option (a) most accurately calculates the additional tax you need to have withheld, while option (b) does so with a little less accuracy.

Instead, if you (and your spouse) have a total of only two jobs, you may check the box in option (c). The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



Multiple jobs. Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

Step 3. This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 501, Dependents, Standard Deduction, and Filing Information. You can also include other tax credits for which you are eligible in this step, such as the foreign tax credit and the education tax credits. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

Step 4 (optional).

Step 4(a). Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

Step 4(b). Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2024 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

Step 4(c). Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

Upper Columbia Academy

Payroll Agreement

As a Student Worker of Upper Columba Aca	ademy, I agree to the following:					
labor laws and Upper Columbia Academy, a result in my work termination and may b procedures.						
Additionally, I voluntarily agree to the follow	ving (please initial each applicable item):					
I voluntarily assign the wages I earn as a student worker of Upper Academy as direct payments to my student account for the purpose of paying current and future tuition, fees and educational costs at Upper Columbia Academy.						
	pper Columbia Academy to deduct from oyee a 10% tithe to the Upper Columbia					
Student Name (Printed)						
Student Signature	Date					
Parent Signature (if Student is under 18)	 Date					

Employee Paid Sick Leave Notification

Upper Columbia Conference of Seventh-day Adventists

As an Upper Columbia Conference non-exempt employee (except for seasonal employees at Camp MiVoden), you are entitled to accrue paid sick leave beginning January 1, 2018 or the beginning of your employment whichever comes later.

Accrual Rate:

This paid sick leave will accrue at 0.03855 hour per hour worked. Employees will have access to a short-time sick leave and extended sick leave.

Eligible Reasons for Paid Sick Leave:

You may use this accrued paid sick leave for the following reasons (as outlined at RCW 49.46.210(1)(b) and (c) and ORS 653.616):

- To care for yourself or a family member;
- When you or a family member is the victim of sexual assault, domestic violence, or stalking; and
- In the event our business or your child's school or place of care is closed by order of a public official for any health-related reason.

Accrual Year:

The Upper Columbia Conference accrual year is on a rolling calendar year.

Maximum Balance:

Accrued, unused paid short-term sick leave will accrue to a maximum balance of 76 hours. Accrued, unused paid short-term sick leave in excess of 76 hours will be transferred to the extended sick leave bank. Extended paid sick leave may be accrued up to a maximum of 1,000 hours.

Employees working less than 40 hours per week accrue paid sick leave or paid time off at a pro rata basis of accrual maximum.

Access to Paid Sick Leave:

You are entitled to use accrued paid sick leave beginning the start of your employment. Sick leave may only be used for scheduled time the employee would normally work. Accrued time will not be paid out upon termination of employment.

Retaliation against you by Upper Columbia Conference of Seventh-day Adventists for using paid sick leave for authorized purposes, or for the exercise of any rights under the Minimum Wage Act (RCW chapter 49.46 and ORS 653), is prohibited.

Print Employee's Name	Employee's Signature	Date



Employment Standards Program PO Box 44510 Olympia WA 98504-4510

Phone: 866-219-7321

Employee Name

Address

 Fax:
 360-902-5300

 Email:
 TeenSafety@Lni.wa.gov

Web: www.Lni.wa.gov/TeenWorkers

Parent/School Authorization

For parents or legal guardians and school officials to indicate approval for a minor employee to work accordingly to the terms listed by the employer and within the limits of child labor regulations.

This is not a Minor Work Permit

Employers must have a Minor Work Permit endorsement on their Business License for each work location where minors are employed and renew it each year. To apply, go to: http://bls.dor.wa.gov/minorworkpermit.aspx

Date of Birth (mm/dd/yyyy) (Must be accompanied by proof)

Phone Number

Do not mail this form to L&I. This form must be *kept on file by the employer* at the minor's workplace and be available for department audit. A copy should also be maintained by the minor's school representative. Additionally, the employer must renew this parent/school authorization *by September 30 of each year or when work schedule changes.*

Employee Information — To be completed by the employee

City	State		Zip Code	
School's Name (if home schooled/not enrolled in school/onlinupper Columbia Academy	ne classes please note)	School's Ph (509) 24		e area code)
School's Address	City	State	Zip Code	
3025 E. Spangle-Waverly Road	Spangle	WA	99031	
Are you employed at another job? Yes No	If "Yes", how many hour	s do you work	k per week?	
Employer Information				
Before allowing a minor to begin work, you must obto completed Parent/School Authorization. As the emplocompleted by you before collecting signatures.				
Employer Business Name	Phone Number			
Employer Business Name Upper Columbia Conference of SDA	Phone Number (509) 245-3600	-		
			iit	
Upper Columbia Conference of SDA Washington Unified Business Identifier (UBI) 600 - 038 - 890 Location Address (Physical location where minor will be working)	(509) 245-3600 Expiration Date of Min	or Work Perm	State	Žip Code
Upper Columbia Conference of SDA Washington Unified Business Identifier (UBI) 600 - 038 - 890 Location Address (Physical location where minor will be working) 3025 E. Spangle-Waverly Rd	(509) 245-3600 Expiration Date of Min	or Work Perm		Zip Code 99031
Upper Columbia Conference of SDA Washington Unified Business Identifier (UBI) 600 - 038 - 890 Location Address (Physical location where minor will be working) 3025 E. Spangle-Waverly Rd Contact Name	(509) 245-3600 Expiration Date of Min	or Work Perm	State	· ·
Upper Columbia Conference of SDA Washington Unified Business Identifier (UBI) 500 - 038 - 890 Location Address (Physical location where minor will be working) 3025 E. Spangle-Waverly Rd Contact Name Erin Tungesvik, Vice-Principal of Finance	(509) 245-3600 Expiration Date of Min	or Work Perm	State	· ·
Upper Columbia Conference of SDA Washington Unified Business Identifier (UBI) 500 - 038 - 890 Location Address (Physical location where minor will be working) 3025 E. Spangle-Waverly Rd Contact Name Erin Tungesvik, Vice-Principal of Finance Wage per Hour	(509) 245-3600 Expiration Date of Min	or Work Perm	State	· ·
Upper Columbia Conference of SDA Washington Unified Business Identifier (UBI) 500 - 038 - 890 Location Address (Physical location where minor will be working) 3025 E. Spangle-Waverly Rd Contact Name Erin Tungesvik, Vice-Principal of Finance	(509) 245-3600 Expiration Date of Min	or Work Perm	State	· ·
Upper Columbia Conference of SDA Washington Unified Business Identifier (UBI) 500 - 038 - 890 Location Address (Physical location where minor will be working) 3025 E. Spangle-Waverly Rd Contact Name Erin Tungesvik, Vice-Principal of Finance Wage per Hour \$ 12.21 List of Specific Job Duties	(509) 245-3600 Expiration Date of Min City Spangle	or Work Perm	State WA	99031
Upper Columbia Conference of SDA Washington Unified Business Identifier (UBI) 600 - 038 - 890 Location Address (Physical location where minor will be working) 3025 E. Spangle-Waverly Rd Contact Name Erin Tungesvik, Vice-Principal of Finance Wage per Hour \$ 12.21	(509) 245-3600 Expiration Date of Min City Spangle	or Work Perm	State WA	99031 ce Assistant,

Employers: Please read before filling out the anticipated hours and work schedule on the following page. Per WAC 296-125-027 — Minors *cannot* work during the hours that school is in session. Employers should refer to the minor's neighborhood school's website for the hours of school to determine what hours the minor is eligible to work. This rule also applies to homeschooled students. No students should work during the hours that their neighborhood school is in session unless the employer has been granted a variance from the Department of Labor & Industries.

Minors cannot work during the hours that school is in session. Employers should refer to the school's website to determine what these hours are.

Hours and Schedules Minors are Permitted to Work in Non-Agricultural John

nonis and	nous and schedules Millols are remitted to work in Non-Agricultural Jobs	VOIN III NOII-AGIICUITUI JODS				
Age Group	School Week	Hours/Day	Hours/Week	Days/Week	Begin	Quit
14 — 15	School Week	3 hours (8 hrs Sat-Sun)	16 hours	6 days	7 a.m.	7 p.m.
Years Old	Non-School Week	8 hours	40 hours	6 days	7 a.m.	7 p.m. (9 p.m. June 1 to Labor Day)
	School Week	4 hours (8 hrs Fri – Sun)	20 hours	6 days	7 a.m.	10 p.m. (Midnight Fri – Sat)
16 — 1/ Years Old	School Week with a special variance	6 hours (8 hrs Fri – Sun)	28 hours	6 days	7 a.m.	10 p.m. (Midnight Fri – Sat)
	Non-School Week	8 hours	48 hours	6 days	5 a.m.	Midnight

An adult must supervise minors working after 8 p.m. in service occupations such as restaurants and retail businesses.

Overtime rules apply for all hours worked over 40 in one week.

Special Variance does not apply to home-schooled students.

	Quit	9 p.m.	8 p.m.	9 p.m.	10 p.m. (No later than 9 p.m. on more than 2 consecutive nights before a school day)	10 p.m.
	Begin	5 a.m.	7 a.m. (6 a.m. in animal agriculture & irrigation)	5 a.m.	5 a.m.	5 a.m.
	Days/Week	6 days	6 days*	6 days*	6 days*	6 days*
Agricultural Jobs	Hours/Week	40 hours	21 hours	40 hours	28 hours	50 hours (60 hours per week in mechanical harvest of peas, wheat, and hay)
Hours and Schedules Minors are Permitted to Work in Agricultural Jobs	Hours/Day	8 hours	3 hours (8 hrs. non-school days)	8 hours	4 hours (8 hrs non-school days)	10 hours
chedules Minors	School Week	Non-School Week	School Week	Non-School Week	School Week	Non-School Week
Hours and S	Age Group	12 — 13 Years Old	14 — 15 Vears Old	200	16 — 17	Years Old

• 12 – 13 year-olds may work only during non-school weeks hand-harvesting berries, bulbs, cucumbers, and spinach.

*Exception — 14 – 17 year-olds are allowed to work 7 days a week in dairy, livestock, hay harvest, and imgation during school and non-school weeks.

	Dave	Hours	Hours per Day	Hours p	Hours per Week	Start Time Circle A.M. or P.	Start Time Circle A.M. or P.M.	100	Quitting Time Circle A.M. or P.M	y Time 1. or P.M
	caha	Employer	Parent/ School Adj.	Employer	Parent/ School Adj.	Employer	Parent/ School Adj.	Employer		Parent/ School Adj.
School	Mon — Thurs 3/4	3/4		16/20		5am/7am A.M. / P.M.	A.M. / P.M.	A.M. / P.M. 7p/12p A.M. / P.M.	A.M. / P.M.	A.M. / P.M.
Weeks	Fri — Sun 3/8	3/8				5am/7am A.M. / P.M.	A.M. / P.M.	A.M. / P.M. 7p/12p A.M. / P.M.	A.M. / P.M.	A.M. / P.M.
Non-	Sun — Sat	80		40		5am/7am	MOV	7p/12p	M d / M d	2 0 2 4
Weeks	Parents adjust only					A.M. 7 . IM.	. IN. 17.101.C			

Required Signatures

Employee's Signature			
Print Name	Employee's Signature		Date
Employer's Signature			
Print Name	Employer Representative Signature	Title	Date
aily and weekly work sch	I representatives should not sign this nedules are completely filled out to re limit the hours of work for a minor a e.g., homework, attendance, etc., an ed by the employer.	eflect the anticipated in ccording to how the n	maximum hours of work. ninor will be affected by
Parental Authorization			
consent to allow the min	or listed to be employed at the occu	oation and under the	conditions stated above.
Print Name	Parent or Guardian Signature	Phone Number	Date
Comments by Parental Authority			
pproved. Erin Tungesvik	oyment meet the requirements of sci		ations and are hereby VP of Finance
Print Name	School Representative Signat	ure Title	
509-245-3615			
Phone Number	Date		
Comments by School Representa	ative		
	onal School Week Special \ 6 – 17 Year Old Minors in Non-Ag		
	a 16 – 17 year-old minor to work up to 2 authorized school official and the parent. -0700]		
School officials should n student's progress indica	ot sign for any additional hours allow ates the additional work hours will be	red by the Special Vari detrimental to the min	iance if a review of the nor's educational activities.
Please note: The Special to homeschooled studen	Variance is only for minors enrolled ts.	in public or private sc	hool. This does not apply
	the Special Variance for additional schoecked "Yes", both signatures below are		
Parental Authorization	Soh	ool Authorization	