



UpReach Therapeutic Equestrian Center, Inc.

153 Paige Hill Road, Goffstown, NH 03045

603.497.2343 FAX: 603.497.5367



YOUTH VOLUNTEER ADDITIONAL PAPERWORK REQUIREMENTS

Today's date: ____/____/____

For youth completing court-ordered community service, these forms are not required.

For youth volunteering by choice

Those currently under 15 years of age and under:

- Complete the top portion of the Employer's Request for Child Labor* form
- Take this form to your school's Guidance Office, with proof of birthdate (birth certificate, etc.)
- They will issue you a Youth Employment Certificate
- Return the Youth Employment Certificate to UpReach prior to being able to volunteer
- If you are a home-schooled student, your district's SAU office will issue the Certificate
- If you are an out-of-state Youth Volunteer, this form (with proof of birth date) can be taken to the SAU office, 11 School Street, Goffstown, NH 03045

Those currently under 16 and 17 years of age:

- Complete the Parental Permission for Employment* form and return to UpReach prior to being able to volunteer.

For youth volunteering for a school requirement or program, these forms are not required. UpReach will coordinate with your school for the paperwork required. You will need to provide contact name/information for your school.

Your Name: _____
(First) (Middle Initial) (Last)

School Requirement (i.e. senior project, transition program, community service hours for graduation, etc.) :

School Name: _____

Staff Name: _____ Title: _____

Phone: _____ Email: _____

QUESTIONS? CONTACT: Operations Manager, Kath Conway at 603.497.2343 or kath@upreachtec.org

*Youth Volunteers are expected to comply with the same requirements as Youth who are employed.

STATE OF NEW HAMPSHIRE
DEPARTMENT OF LABOR
PO BOX 2076
CONCORD, NH 03302-2076

EMPLOYER'S REQUEST FOR CHILD LABOR

Please issue a NH Youth Employment Certificate to:

NAME OF MINOR

SOC. SEC. NUMBER (optional)

AGE

DATE OF BIRTH

SEX

That he/she may be legally employed, in accordance with Revised Statutes Annotated 276-A as amended, by

UpReach Therapeutic Riding Center
(SHOW CORPORATION OR TRADE NAME, IF ANY)

20-3213867
(FED. ID #)

153 Paige Hill Rd, PO Box 355 Goffstown NH 03045
STREET & NUMBER CITY, STATE, ZIP

(603) 497-239
TEL. #

Non-profit, human services, equine-assisted activities
INDUSTRY OF EMPLOYER

Volunteering in therapeutic riding/driving lessons, barn chores, office tasks
NATURE OF EMPLOYMENT - BE SPECIFIC

VOLUNTEER
NOT FOR PAY

With this application the minor must present a Birth Certificate or other evidence of date of birth, to the School Department, and the certificate will be issued there. The certificate must be kept on file for your records.

Karen Kersting 603 497 2343
Employer's Signature/Telephone Number
Exec. Dir

STATE OF NEW HAMPSHIRE
DEPARTMENT OF LABOR
PO BOX 2076
CONCORD, NH 03302-2076

EMPLOYER'S REQUEST FOR CHILD LABOR

Please issue a NH Youth Employment Certificate to:

NAME OF MINOR

SOC. SEC. NUMBER (optional)

AGE

DATE OF BIRTH

SEX

That he/she may be legally employed, in accordance with Revised Statutes Annotated 276-A as amended, by

UpReach Therapeutic Riding Center
(SHOW CORPORATION OR TRADE NAME, IF ANY)

22-3213867
(FED. ID #)

153 Paige Hill Rd, PO Box 355 Goffstown NH 03045
STREET & NUMBER CITY, STATE, ZIP

(603) 497-2349
TEL. #

Non-profit, human services, equine-assisted activities
INDUSTRY OF EMPLOYER

Volunteering in therapeutic riding/driving lessons, barn chores, office tasks
NATURE OF EMPLOYMENT - BE SPECIFIC

VOLUNTEER
NOT FOR PAY

With this application the minor must present a Birth Certificate or other evidence of date of birth, to the School Department, and the certificate will be issued there. The certificate must be kept on file for your records.

Karen Kersting 603 497-2343
Employer's Signature/Telephone Number
Exec. Dir



State of New Hampshire
Department of Labor

Phone:
603.271.0127
Email:
Inspectiondiv@dol.nh.gov

EMPLOYER'S REQUEST FOR CHILD LABOR

Please issue a NH Youth Employment Certificate to:

Name of Minor

Social Security Number (optional)

Age

Date of Birth

Gender

That he/she may be legally employed, in accordance with Revised Statutes Annotated 276-A as amended,
by:

(Corporation or Trade Name, if any)

(Federal Identification Number)

Street Address

City, State, Zip

Industry of Employer

Nature of Employment – BE SPECIFIC

With this application and a Birth Certificate or other evidence of date of birth, the School Department or
a parent or legal guardian, may issue the certificate. The certificate must be kept on file.

Employer's Signature

Telephone Number