



Application for a Certificate of Eligibility to Employ Child Performers

A. Submission Instructions

A Certificate of Eligibility to Employ Child Performers must be obtained prior to employing any child performer. Certificates are renewable every three (3) years. To obtain or renew a certificate:

- Complete Parts B, C, D and E of this application.
- Attach proof of New York State Workers' Compensation and Disability Insurance.
 - If you currently have employees in New York, you must provide proof of coverage for those New York State workers by attaching copies of Form C-105.2 and DB-120.1, obtainable from your insurance carrier.
 - If you are currently exempt from this requirement, complete Form CE-200 attesting that you are not required to obtain New York State Workers' Compensation and Disability Insurance Coverage. Information on and copies of this form are available from any district office of the Workers' Compensation Board or from their website at www.wcb.ny.gov. Click on "WC/DB Exemptions," then click on "Request for WC/DB Exemptions."
- Attach a check for the correct amount from Section D, made payable to the Commissioner of Labor.
- Sign and mail this completed application **and all required documents** to the address listed above.

If you have any questions, call (518) 457-1942, e-mail CPinfo@labor.ny.gov or visit the Department's website at www.labor.ny.gov.

B. Type of Request (check one)

New Renewal Current Certificate Number _____

Are you seeking this certificate to employ child models? Yes No

C. Employer and Employment Information

1. Employer Name _____

2. Type of business organization (check one) Corporation Sole Proprietorship Partnership
 Limited Liability Company Limited Liability Partnership

3. Corporate Officers, if any (list additional names and titles on back)

Name _____ Title _____

4. Employer FEIN _____

5. Business Address _____ City _____

State/Province/Region _____ Postal Zip Code _____ Country _____ Phone _____

Fax _____ E-mail _____

6. Mailing Address (if different) _____ City _____

State/Province/Region _____ Postal Zip Code _____ Country _____ Phone _____

7. Location(s) of Employment of Child Performers _____

8. Type of Employment (e.g. movie, play, commercial, etc.) _____

F. Employer Responsibilities (keep this part for your information)

Among the responsibilities of employers of child performers are:

1) Trust Account (for paid employment only)

New York State law requires that a child performer's employer transfer fifteen percent (15%) of a child performer's gross earnings for placement into a trust for the child performer established by the child performer's parent/guardian. In order to do this the employer must:

- Obtain from the child performer's parent/guardian or custodian the information required to make the transfers into the account for each child performer employed.
- Transfer the appropriate amounts for placement into the trust account.
 - When the employment contract is for 30 days or less, transfer 15% of gross earnings within thirty (30) days following the final day of the child performer's employment.
 - When the employment contract is for longer than 30 days, transfer 15% of gross earnings at the end of each payroll period.
 - By request of the parent/guardian or custodian, the amount transferred can be increased to more than 15%.
 - If the parent/guardian or custodian has not provided the necessary information within 15 days of the start of employment, or no such account has been established, transfer the money together with the child performer's name, last known permanent address, date of birth, social security number, name and address of the child's parent (s) or guardian(s) and their home and business phone numbers; and such other identifying information as the Comptroller may require, to the State Comptroller for placement into the child performer's holding fund. The State Comptroller may be contacted at (518) 486-1240.
- Provide parent/guardian with a written record of deductions from wages and notification of transferred funds within 5 days of transfer which may be included on the pay stub.

2) Educational Requirements

New York State law requires that all child performers maintain satisfactory academic performance as determined by their school of enrollment. Employers must familiarize itself with the requirements of Part 186-5.1 for example, provision of teachers, space, and record keeping.

3) Certificates, Permits, Notices

New York State law requires that all employers of child performers have a valid Certificate of Eligibility to Employ Child Performers issued by the Department. All child performers employed must have a valid Child Performer Permit from the Department. Therefore, the employer must:

- Renew its Certificate of Eligibility no later than 30 days prior to expiration.
- Obtain a copy of a valid Child Performer Permit, or valid Temporary Child Performer permit, for each performer employed. A Child Performer Permit is only valid for paid employment if the parent/guardian has attached documentation of the performer's trust account and information necessary to make transfers to the account.
- Obtain Child Performer's Emergency Contact Information/Authorization to Provide Emergency Medical Treatment for each child performer employed. Form LS-563 may be used for this purpose.
- Submit a Notice of Use of Child Performers at least 2 business days prior to the beginning of use of child performers. Use form LS-556 for this purpose.
- Keep copies of the Certificate of Eligibility, Child Performer Permit(s) on file, and make them available for inspection at the location of employment.

4) Other Employer Responsibilities

a) Responsible Person

- At least one responsible person should be designated to supervise and safeguard the performers throughout their employment. A parent/guardian, an adult (over 18), may be the designated responsible person.
- If the parent/guardian is not present, the employer must designate a responsible person and either, notify the parent/guardian of the designee, or agree with parent/guardian on the designee.
- A responsible person must be designated according to Part 186-2.1(t) of the regulations.

For Infants Only

- Provide one on-set RN and one responsible person for each three or fewer infants between fifteen days and six weeks of age. Provide one on-set RN and one responsible person for each ten or fewer infants between six weeks and six months of age.
- Such RNs must have significant experience in pediatric practice.

- b) Provide Safety and Health training to child performers and responsible persons as required by Section 186-6.5 of the regulations.
- c) Maintain appropriate New York State Workers' Compensation/Disability Insurance and Unemployment Insurance Coverage.
- d) Observe Safety, Health, Wage, and Hours laws.
- e) Maintain records according to Section 186-7.2.
- f) Provide meal and rest breaks according to Section 186-6.3 and 186-6.4.



New York State Department of Labor
 Division of Labor Standards
 Permit and Certificate Unit
 Building 12, Room 266A
 State Office Campus
 Albany, NY 12240

Verification of Workers' Compensation/Disability Insurance Coverage

This form is to be completed by Payroll Services for applicants that apply for Certificates of Eligibility to Employ Child Performers. Submit this form with the application and forms C-105.2 and DB-120.1 from the insurance carriers.

The employees of (enter name and address of applicant)

are covered under the Workers' Compensation Policy Disability Insurance Policy of

(enter name and address of the Payroll Service whose policies cover the employees of the applicant listed above)

I, the undersigned, affirm that I am authorized to submit this verification on behalf of the applicant and Payroll Service shown above and that a written contractual agreement exists between the applicant and Payroll Service to provide Workers' Compensation and Disability Insurance to employed performers.

I certify under penalty of perjury that the information in this verification and all attachments is complete and accurate to the best of my knowledge.

 Authorized Representative Signature

 Date

 Authorized Representative Name (*Please Print*)

 Title