



Application for Variance from the Child Performer Regulations

A. Submission Instructions

- If a significant hardship is anticipated in complying with a part(s) of the regulations, an employer may apply for a variance from such parts.
- Complete and fax this application to 518-457-2731 at least 2 business days before the date the requested modifications should take effect.

B. Employer Information

1. Employer Name _____
2. Certificate of Eligibility Number _____
3. Work Location _____
4. Employer Contact Information (name and title of on-site representative) _____
 Phone _____ Fax _____ Email _____

C. Variance Information

1. Please spell out the specific reason the variance is requested _____

2. Time Period (requested time for variance to be in effect) _____
3. Number of children to be covered by variance _____
4. List performers affected by variance (use additional sheet if necessary) _____

5. List any additional or alternative provisions you will make to protect performers _____

D. Signature

Name of requester (print) _____ Title _____

Signature _____ Date _____

If your request for a variance is granted, the NYS Department of Labor will send you a written Notice of Variance, which you must keep available for inspection at the place of employment.