



Illinois Department Of Labor
 Fair Labor Standards Division
 160 North Lasalle Street, Ste 1300
 Chicago, Illinois 60601
 800-645-5784
 DOL.ChildLaborComplaints@illinois.gov
 http://labor.illinois.gov/

CHILD LABOR LAW COMPLAINT FORM

Business Information

Name of Business

Owner/Contact Name

Street Address

Owner Email Address

City

State

ZIP Code

County

Business Telephone Number

Type of Business

Minor Information

Name of Minor

Age of Minor

Hours Working

What Date Was Minor Observed?

Does Minor Have A Work Permit?

Describe The Possible Violation of Child Labor Law.

Complainant Information

Name of Complainant

Phone Number

Email Address

BY ACCEPTING AND SUBMITTING THIS FORM, THE COMPLAINANT AFFIRMS AND CERTIFIES THAT ALL INFORMATION PROVIDED AND THE STATEMENTS MADE HERIN ARE TRUE, CORRECT, AND COMPLETE.

Use additional sheets if necessary and attach copies of all supporting documents and other evidence.

Signature

Date

OFFICIAL USE

File

CO

Type

Date Received