

EMPLOYER QUESTIONNAIRE

Schedule A or Shepherd Information

Is this application in support of a Schedule A (Group I or II) or Shepherd Occupation? Yes No

Schedule A, Group I includes Physical Therapists and Registered Nurses

Schedule A, Group II includes Aliens of Exceptional Ability

Employer Information (Corporate Headquarters or Main Office)

1. Employer's name: _____
2. Address 1: _____
3. Address 2: _____
4. City: _____
State/Province: _____
Country: _____
Postal code: _____
5. Phone number: _____ Extension: _____
6. Number of employees in area of intended employment: _____
7. Year commenced business: _____
8. FED EIN Number: _____
9. NAICS code (industry code): _____
10. Is your employer a closely held corporation, partnership, or sole proprietorship in which you have an ownership interest? Do you have a familial relationship with any of the owners, stockholders, partners, corporate officers, or incorporators? Yes No

Employer Contact Information

11. Contact's last name: _____
First name: _____
Middle initial: _____
Job Title: _____
12. Address 1: _____
Address 2: _____
13. City: _____
State/Province: _____
Country: _____
Postal Code: _____
14. Phone number: _____ Extension: _____
15. E-mail address: _____

Wage Offer Information

16. Offered wage:

From: \$ _____ To (optional): \$ _____

Per (choose one): Hour Week Bi-Weekly Month Year

Job Opportunity Information (where work will actually be performed)

17. Primary worksite (where work is to be performed)

Address 1: _____

Address 2: _____

18. City: _____

State: _____

Postal Code: _____

19. Job title: _____

20. Education. Minimum level required:

- None High School Associate's Bachelor's Master's Doctorate
 Other

If "Other" is indicated, specify the education required:

Major field of study: _____

21. Is training required in the job opportunity? Yes No

If "Yes," number of months of training required: _____

Indicate the field of training: _____

22. Is experience in the job offered required for the job? Yes No

If "Yes," number of years of experience required: _____

23. Is there an alternate field of study that is acceptable? Yes No

If "Yes," specify the major field of study: _____

24. Is there an alternate combination of education and experience that is acceptable?

- Yes No

If "Yes," specify the alternate level of education required: _____

- None High School Associate's Bachelor's Master's Doctorate
 Other

If "Other" is indicated, indicate the alternate level of education required: _____

If applicable, indicate the number of years of experience acceptable: _____

25. Is a foreign educational equivalent acceptable? Yes No

26. Is experience in an alternate occupation acceptable? Yes No

If "Yes," number of months of experience in alternate occupation required: _____

Identify the job title of the acceptable occupation: _____

27. Job duties—Add attachment if necessary. Include use of specific tools, technologies, machines, software, devices, etc.

28. Are the job opportunity's requirements normal for the occupation? Yes No

If the answer to this question is "No," you must be prepared to provide documentation demonstrating that the job requirements are supported by business necessity.

29. Is knowledge of a foreign language required to perform the job duties? Yes No

If the answer to this question is "Yes," you must be prepared to provide documentation demonstrating that the language requirements are supported by business necessity.

30. Specific skills or other requirements: _____

31. Does this application involve a job opportunity that includes a combination of occupations?

Yes No

32. Did the alien employee complete the training required for the requested job opportunity?

Yes No N/A

If "yes," please describe relevant training: _____

33. Does the alien employee have the experience as required for the requested job?

Yes No N/A

If "yes," please describe relevant experience: _____

33. Does the alien employee possess an alternate combination of education and experience?

Yes No N/A

If "yes," please describe: _____

34. Does the alien employee have the experience in an alternate occupation? Yes No N/A

If "yes," please describe: _____

35. Did the alien employee gain any of the qualifying experience with the employer in a position substantially comparable to the job opportunity requested? Yes No N/A

If "no," please describe job opportunity: _____

36. Did the employer pay for any of the alien employee's education or training necessary to satisfy any of the employer's job requirements for this position? Yes No

37. Is the alien employee currently employed by the petitioning employer? Yes No

38. Is the position identified in this application being offered to the alien employee? Yes No

39. Does the job require the alien to live on your premises? Yes No

40. Is the application for a live-in household domestic service worker? Yes No

If "yes," have you and the alien executed the required employment contract, and has the employer provided a copy of the contract to the alien? Yes No N/A

RECRUITMENT EFFORTS

Occupation Type

1. Is this application for a professional occupation, other than a college or university teacher?
Professional occupations are those for which a bachelor's degree (or equivalent) is normally required.
 Yes No
2. Is this application for a college or university teacher? Yes No
If "yes," complete questions below.
Did you select the candidate using a competitive recruitment and selection process? Yes No
Did you use the basic recruitment process for professional occupations? Yes No

Special Recruitment and Documentation Procedures for College and University Teachers *only*:

3. Date alien selected: _____
4. Name of national professional journal in which advertisement was placed:

5. Specify the additional recruitment information in this space. Add an attachment if necessary.

Professional/Non-Professional Information *only*:

6. Start date for the SWA job order: _____
7. End date for the SWA job order: _____
8. Is there a Sunday edition of the newspaper in the area of intended employment? Yes No
9. Name of newspaper (of general circulation) in which the first advertisement was placed:

10. Date of first advertisement identified in question 9: _____
11. Name of newspaper or professional journal in which second advertisement was placed (if applicable).
Newspaper: _____
Journal: _____
12. Date of second Sunday advertisement (if newspaper) or date of advertisement (if other than newspaper) identified in question 11: _____

Professional Information (Complete if the job opportunity involves a *professional occupation*.)—Please indicate which additional recruitment steps you typically use to identify candidates for open positions.

13. Dates advertised at job fair
From: _____ To: _____
14. Dates of on-campus recruiting
From: _____ To: _____
15. Dates posted on employer website
From: _____ To: _____

16. Dates advertised with trade or professional organization

From: _____ To: _____

17. Dates listed with job search website

From: _____ To: _____

18. Dates listed with private employment firm

From: _____ To: _____

19. Dates advertised with employee referral program

From: _____ To: _____

20. Dates advertised with campus placement office

From: _____ To: _____

21. Dates advertised with local or ethnic newspaper

From: _____ To: _____

22. Dates advertised with radio and TV ads

From: _____ To: _____

General Information

23. Have you received payment of any kind for the submission of this application? Yes No

If "yes," specify: _____

24. Has the bargaining representative for workers in the occupation in which the alien will be employed been provided with notice of this filing at least 30 days but not more than 180 days before the date the application is filed? Yes No N/A

25. If there is no bargaining representative, has a notice of this filing been posted for 10 business days in a conspicuous location at the place of employment, at least 30 days before but not more than 180 days before the date the application is filed? Yes No N/A

26. Have you had a layoff in the area of intended employment in the occupation involved in this application or in a related occupation within the six months immediately preceding the filing of this application? Yes No

If "yes," were the laid-off U.S. workers notified and considered for the job opportunity for which certification is sought? Yes No N/A

Employer Declaration

By virtue of my signature below, *I hereby certify* the following conditions of employment:

1. The offered wage equals or exceeds the prevailing wage, and our company will pay the prevailing wage from the time permanent residency is granted or from the time the alien is admitted to take up the certified employment.
2. The wage is not based on commissions, bonuses, or other incentives, unless we guarantee a wage paid on a weekly, bi-weekly, or monthly basis that equals or exceeds the prevailing wage.
3. Our company has enough funds available to pay the wage or salary offered the alien.
4. We will be able to place the alien on the payroll on or before the date of the alien's proposed entrance into the United States.
5. The job opportunity does not involve unlawful discrimination, by race, creed, color, national origin, age, sex, religion, handicap, or citizenship.

6. The job opportunity is not:
 - a. Vacant because the former employee is on strike or is being locked out in the course of a labor dispute involving a work stoppage; or
 - b. At issue in a labor dispute involving a work stoppage.
7. The job opportunity's terms, conditions, and occupational environment are not contrary to federal, state, or local law.
8. The job opportunity has been and is clearly open to any U.S. worker.
9. The U.S. workers who applied for the job opportunity were rejected for lawful job-related reasons.
10. The job opportunity is for full-time, permanent employment.

I hereby designate the agent or attorney identified to represent our company for the purpose of labor certification and, by virtue of my signature in Block 3 below, I take full responsibility for the accuracy of any representations made by my agent or attorney.

I declare under penalty of perjury that I have read and reviewed this application and that to the best of my knowledge the information contained therein is true and accurate. I understand that to knowingly furnish false information in the preparation of this form and any supplement thereto or to aid, abet, or counsel another to do so is a federal offense punishable by fine or imprisonment up to five years or both (18 USC 2, 1001).

Last name	First name	Middle initial
Title		
Signature		Date signed