9 FAM 40.51 Exhibit III Application for Alien Employment Certification

U.S. DEPARTMENT OF LABOR oppoyment and Training Administration IMPORTANT: READ CAREFULLY BEFORE COMPLETING THIS FORM. PRINT legibly in link or use a typewriter. If you need space to answer questions on this form, use a separate sheet. Identify each answer with the number of the corresponding question. SIGN AND DATE each sheet in original signature. APPLICATION To knowingly furnish any false information in the preparation of this form and any supplement thereto or to aid, abet, or counsel another to do so is a felony punishable by \$10,000 fine or 5 years in the penitentiary, or both (18 U.S.C. 1001). FOR ALIEN EMPLOYMENT CERTIFICATION PART A. OFFER OF EMPLOYMENT 1. Name of Allen (Family name in capital letter, First, Middle, Maiden) 3. Type of Visa (If in U.S.) 2. Present Address of Allen (Number, Street, City and Town, State ZIP Code or Province, Country) THE FOLLOWING INFORMATION IS SUBMITTED AS EVIDENCE OF AN OFFER OF EMPLOYMENT Telephone (Area Code and Number) 4. Name of Employer (Full name of organization) 6. Address (Number, Street, City or Town, Country, State, ZIP Code) 7. Address Where Alien Will Work (If different from item 6) 9. Name of Job Title 10. Total Hours Per Week 12. Rate of Pay 8. Nature of Employer's Business Activity a. Basic b. Overtime a. Basis (Hourly) \$ per hour p.m. 13. Describe fully the job to be performed (Duties) 14. State in detail the MINIMUM education, training, and experience for a worker to perform satisfactorily the job duties described in item 13 above. 15. Other Special Requirements EDUCATION Grade (Enter num- School College Degree Required (Specify) High School years) Major Field of Study Type of Training TRAINING No. Yrs. No. Mos. Job Offered Related Related Occupation (specify) Occupation Yrs | Mos Yrs I Mo 17. Number of Employees > Alien Will Supervise 16. Occupational Title of Person Who Will Be Alien's Immediate Supervisor

Replaces MA 7-50A, B and C (Apr. 1970 edition) which is obsolete

Endorsements (Make no entry in section for government use only.)

L.O

R.O.

Ind. Code Occ. Title

Date Forms Received

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N.O. Occ. Code

ETA 750 (Oct. 1979)

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18. Complete items only if job is temporary				job is	unioni	red (Cor	npiete)				
a. No. of Openings to be Filled By Allens Under Job Offer		Exact Dates You Expect To Employ Allen From To		a. Numb e r of Local		b. Name of Local c. City and State					
:											
20. Statement for Live-At-Work Job Offers (Complete for Private Household Job ONLY) a. Description of Residence I b. No. Persons Residing at Place of Employment											
("X" one) ' Number o	of Adults		Children		Ages		c. Will free b	oard and pr	ivate		
' Rooms ☐ House '	-	Boys					room not si one be prov			(" one))
☐ Apartment		Giris									No
21. Describe efforts to recruit	U.S. workers	and the resu	ts. (Spe	cify So	ources o	f Recrui	tment by Name	······································			
										•	
22. Applicants require various times of decumentation. Places year DADT in at the leaf-various translation of the second party of the leaf-various translations.											
22. Applicants require various types of documentation. Please read PART II of the instructions to assure that appropriate support ing documentation is included with your application. 23. EMPLOYER CERTIFICATIONS											
By virture of	f my signature b	HER	EBY CEH	<i>ι ι</i> ⊳Υ τι	ne tolio	ving con	attions of empl	oyment.			
 a. I have enough funds available to pay the wage or salary offered the alien. 				 The job opportunity does not involve untawful discrimination by race, creed, color, national origin, age, sex, religion, handicap, or citizenship. 							
b. The wage offered equals or exceeds the pre- vailing wage and I guarantee that, if a labor certification is granted, the wage paid to the allen when the allen begins work will equal or exceed the prevailing wage which is		f.	The job opportunity is not:								
			 Vacant because the former occupant is on strike or is being locked out in the course of a labor dispute involvin a work stoppage. 						r is Ivolving		
or exceed the prevailing wage which is applicable at the time the alien begins work.				(2)			labor dispute involving a work stoppage.				
c. The wage offered is	not based on co	ommission,									
bonuses, or other incentives, unless I guaran- tee a wage paid on a weekly, bi-weekly or monthly basis.				g. The job opportunity's terms, conditions and occupational environment are not contrary to Federal, State or local law.							
 d. I 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. 				. The job opportunity has been and is clearly open to any qualified U.S. worker.							
		24. DEC	LARATIO	NS							
DECLARATION OF	Pursuant to 28	3 U.S.C. 174	6 i declar	e unde	er pena	ty of pe	rjury the forego	ing is true a	and correct.		
EMPLOYER						,					
Signature				Date							
Name (Type or print)				Title							
1		_									
Authorization of Agent of Employer I HEREBY DESIGNATE the agent below to represent me for the purposes of labor certification and I TAKE FULL RESPONSIBILITY for accuracy of any representations made by my agent.											
Signature of Employer								Date			
Name of Agent (Type or Print)				:	Addres	s of Age	nt (Number, Si	treet, City,	State, ZIP	Code)	

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ITEMIZED INSTRUCTIONS FOR COMPLETING FORM ETA 750

PART A. OFFER OF EMPLOYMENT (To be completed by Employer)

ITEM 1. NAME OF ALIEN. Enter full name exactly as it appears on Part B, "Statement of Qualifications of Alien."

ITEM 2. PRESENT ADDRESS OF ALIEN. Enter whether in the United States or abroad.

ITEM 3. TYPE OF VISA. If the alien is in the United States, enter the type of visa held, i.e., B-2 (visitor), F-1 (Student), or current status as shown on INS Form I-94.

ITEM 4. NAME OF EMPLOYER. Enter full name of business, firm, or organization, or if an individual, enter name used for legal purposes on documents.

ITEM 5. TELEPHONE NUMBER. In job offers for private households, enter a business and home telephone number where all adults are employed.

ITEM 6. ADDRESS OF EMPLOYER. Self-explanatory.

ITEM 7. ADDRESS WHERE ALIEN WILL WORK. Enter the full address of site or location where the work will actually be performed, if different from the address in Item 6.

ITEM 8. NATURE OF EMPLOYER'S BUSINESS. Enter a brief, non-technical description, i.e., retail store, household, university, financial institution.

ITEM 9. NAME OF JOB TITLE. Enter the common name or payroll title of the job being offered.

ITEM 10. TOTAL HOURS PER WEEK. Enter the basic hours of work required per week and overtime hours per week in accordance with State or Federal law for the work and locality.

ITEM 11. WORK SCHEDULE. Show the daily work schedule for the job, i.e., 9 a.m. to 5 p.m., 7 a.m. to 11 a.m. and 4 p.m. to 8 p.m.

ITEM 12. RATE OF PAY. Enter a guaranteed wage and the unit of pay, such as \$\$.00 per hour, \$850 per month, or \$12,000 per year. Wage offered cannot be based on commission, bonuses, or other incentives, unless the employer guarantees a wage paid on a weekly, bi-weekly, or monthly basis.

ITEM 13. JOB DUTIES. Describe the job duties, in detail, that would be performed by any worker filling the job. Specifly equipment used and pertinent working conditions.

ITEM 14. MINIMUM EDUCATION, TRAINING, AND EXPERIENCE REQUIRED TO PERFORM THE JOB DUTIES. Do not duplicate the time requirements. For example, time required in training should not also be listed in education or experience. Indicate whether months or years are required. Do not include restrictive requirements which are not actual business necessities for performance of the job and which would limit consideration of otherwise qualified U.S. workers.

ITEM 15. OTHER SPECIAL REQUIREMENTS. Enter the job related requirements. Examples are short-hand and typing speeds, specific foreign language proficiency, test results. Document business necessity for a foreign language requirement.

ITEM 16. OCCUPATIONAL TITLE OF PERSON WHO WILL SUPERVISE ALIEN. Self-explanatory.

ITEM 17. NUMBER OF EMPLOYEES ALIEN WILL SUPERVISE. Self-explanatory.

ITEM 18. COMPLETE ONLY IF JOB IS TEMPORARY. Does not apply for offers of permanent employment.

ITEM 19. IF THE JOB IS UNIONIZED. Enter the number of the local, the name of the union, and the City and State in which the local has its main office.

ITEM 20. STATEMENT OF LIVE-AT-WORK JOB OFFERS IN PRIVATE HOUSEHOLDS. (Do not complete for other job offers.)

ITEM 20(a). DESCRIPTION OF RESIDENCE. Self-explanatory.

ITEM 20(b). NUMBER OF PERSONS RESIDING AT PLACE OF EMPLOYMENT. Enter the number of adults, children under 18 years old, their sex and specific ages of children.

ITEM 21. RECRUITMENT EFFORTS. Describe in detail efforts to recruit U.S. workers for the job opportunity and the results. List sources of recruitment by name, i.e., Lane Technical School, the Daily Tribune Newspaper, Scientific Journal of America. Specify the number of applicants interviewed from each source and the lawful job-related reasons why they were not hired.

ITEM 22. READ THE GENERAL INSTRUCTIONS FOR ADDITIONAL SUPPORTING DOCUMENTATION WHICH MUST BE SUBMITTED. IN SEPARATE ATTACHMENTS, ALONG WITH THIS APPLICATION. General instructions will provide information that may be required. Documentation for Schedule A may be found in Part II. Department of Labor regulations require that an employer submit documentation to clearly show that the job offer and the recruitment of U.S. workers are in compliance with regulations. In addition, special documentation is required for certain occupational groups.

ITEM 23. EMPLOYER CERTIFICATION. Read carefully. The employer certifies to these eight (8) conditions of employment by signing the form.

ITEM 24. EMPLOYER DECLARATION. All copies of this form must bear the original signature of the employer or the employer's duly authorized representative with hiring authority. False statements are subject to Federal perjury and fraud penalties. The authorization of agent is completed only when the employer designates an agent to represent the employer in applying for labor certification. It is recommended that the employer not sign a blank form, since the employer takes full responsibility for any representations of its agents.