

# DEPARTMENT QUESTIONNAIRE & CHECKLIST NONIMMIGRANT VISAS

**H-1B** 

E-3

0-1

**TN-1** 

(FY 2020)

Complete ONSCREEN & Submit ELECTRONICALLY
NO HANDWRITTEN REQUESTS WILL BE PROCESSED.
THANK YOU FOR YOUR COOPERATION!

TTUHSC Institutional Compliance Immigration Compliance & Services 3601 4th Street, MS 8165 Lubbock, TX 79430

Phone: (806) 743-3949 Email: ICS@ttuhsc.edu

## **DEPARTMENT REQUEST FOR EMPLOYMENT VISA – ALL VISA CATEGORIES**

	FOREIGN EMPLOYEE:			
DEPARTMENT FOAP FOR FEDEX BILLING:				
TYPE OF EMPLOYMENT VISA FILING REQUESTED:				
H-	1B			
	<ul><li>New H-1B at TTUHSC (including persons already in H-1B status transferring to TTUHSC)</li><li>H-1B Extension at TTUHSC</li></ul>			
	Premium processing requested (additional USCIS fee applies. See ICS Immigration Fee Info.			
TN	N (CITIZENS OF CANADA OR MEXICO ONLY)			
	New TN at TTUHSC (including persons already in TN status transferring to TTUHSC) TN Extension at TTUHSC			
	Premium processing requested (additional USCIS fee applies). See ICS Immigration Fee Info.			
E-	3 (CITIZENS OF AUSTRALIA ONLY)			
	<ul> <li>New E-3 at TTUHSC (including persons already in H-1B status transferring to TTUHSC)</li> <li>E-3 Extension at TTUHSC</li> </ul>			
	Premium processing requested (additional USCIS fee applies). See ICS Immigration Fee Into.			
0-	1			
	New O-1 at TTUHSC, (including persons already in H-1B status transferring to TTUHSC).  O-1 Extension to TTUHSC			
	Premium Processing requested (additional USCIS fee applies). See ICS Immigration Fee Info.			
DEPARTM	MENT CHECKLIST			
Co	ompleted General Questionnaires			
Co	ompleted Visa Specific Questionnaires			
Co	ppy of Department Offer Letter with proof of acceptance or employment agreement			
	neck for USCIS filing fee. See, ICS Immigration Fee Info for correct filing fee and accounts by able/payment services guidance for requesting immigration checks.			
	<u>AUTHORIZED SIGNATURE</u>			
I HEREBY AUTHORIZE AND FULLY SUPPORT THE ABOVE-REFERENCED EMPLOYMENT VISA PETITION ON BEHALF OF THE FOREIGN NATIONAL EMPLOYEE NAMED ABOVE.				
PF	RINTED NAME SIGNATURE DATE			

## DEPARTMENT GENERAL QUESTIONNAIRE (ALL VISA CATEGORIES)

Department Name:	
Department Contact:	Name: Phone:@ttuhsc.edu
Foreign Employee Name:	Last Name:  First Name:  Middle Name:
Job Title:	
Highest Academic Degree Required for Position:	
Minimum Years of Work Experience Required:	
Brief, Non-Technical Description of Duties:	
Worksite Address & STOP # List <u>ALL</u> worksite addresses for Employee	
Annual Salary or Hourly Wage Rate:	
Full-Time/Part-Time:	Full-Time Part-Time Hours/week:
Employment Start & End Dates	to
Other Special Requirements (licenses, certifications, etc.)	

#### DEPARTMENT - LABOR CONDITION ATTESTATION & TRANSPORTATION COST ATTESTATION

US immigration law requires a US employer to submit a Labor Certification Application (LCA) to the Department of Labor before submitting the H-1B petition to the USCIS, Before ICS can submit the LCA, the department must certify the following statements and completed the required information.

### A. LABOR CONDITION ATTESTATION (E-3 OR H-1B petitions only)

Department certifies the following with regards to E-3 or H-1B petition to be filed for:			
1.	The salary being paid to the above-named Employee is at least the <b>actu</b> individuals with similar experience and qualifications for the specific emp <b>prevailing wage</b> level for the occupation in the area of employment, which	loyment in question <u>OR</u> the	
2.	The fringe benefits offered to this Employee are equivalent to that offered employed.	d to other US workers similarly	
3.	Employing this person will not adversely affect the working conditions of	US workers similarly employed.	
4.	There is no strike, lockout, or work stoppage due to a labor dispute in this	s occupation.	
5.	Department agrees to assist ICS with all offsite worksite LCA postings up postings will be the responsibility of ICS and no posting notice will be required.		
6.	Department agrees to comply fully with the terms of the LCA stated above employment in E-3 or H-IB status with TTUHSC.	e for the duration of the alien's	
7.	Department fully understands that any willful violation connected with protection the LCA may incur severe penalty for the Department of Labor of Homela long-range impact on TTUHSC's business, future recruitment practices a	and Security which will have a	
Authoriz	zed Department Contact Signature:	Date:	
Authoriz	zed Department Contact Name:		
	B. TRANSPORTATION COSTS ATTESTATION (H1-b or O-1 petition	s only)	
	uired by the USCIS, Department agrees to pay the reasonable cost of retund's home country if s/he is dismissed or terminated before the end of the argument.		
Authoriz	zed Department Contact Signature:	Date:	
Authoriz	zed Department Contact Name:		

#### DEPARTMENT SPECIFIC QUESTIONNAIRE (FOR H-1B & E-3 ONLY)

#### **PREVAILING WAGE & ACTUAL DETERMINATIONS**

TTUHSC is responsible for certain record-keeping in accordance with the Department of Homeland Security and the Department of Labor regulations. All certified Labor Certification Application (LCA) must be maintained in a public access file for a specific period of time and ICS will maintain the public access file and obtain all documents required to be part of that file to ensure national's wages were assessed (e.g. an actual wage based on a formal pay scale or the prevailing wage based on external wage surveys or wage databases). The Department of Labor's Online Wage Library is used to determine the prevailing wage. Departments interested in viewing this database can find it at <a href="http://iccert.doleta.gov">http://iccert.doleta.gov</a>.

#### I. PREVAILING WAGE DETERMINATION:

To assist ICS in obtaining an accurate prevailing wage determination, lease provide the following information. Please be sure to provide only the **MINIMUM** requirements to perform the duties of the position. Note that the minimum requirements or the position are not the same as the employee's qualifications as the employee may have additional experience or qualifications.

JAME:	EMPLOYEE'S NAME:
TITLE:	JOB TITLE:
LD OF UDY):	MINIMUM EDUCATION REQUIRED (DEGREE & FIELD OF STUDY):
IRED:	MINIMUM YEARS OF EXPERIENCE REQUIRED:
FTER VED):	MINIMUM YEARS OR TRAINING NEEDED (AFTER DEGREE RECEIVED):
ENTS:	OTHER SPECIAL REQUIREMENTS:
LARY:	PROPOSED SALARY:
JTIES:	COMPLETE DESCRIPTION OF JOB DUTIES:

#### EXPORT CONTROLS CERTIFICATION (FOR H-1B OR O-1 ONLY)

Effective February 20, 2011 immigration regulations require US employers to attest that export compliance regulations have been properly met as they pertain to an international employee working in H-1B or O1-A status. All US employers must provide this information in the actual H-1B or o-1A filing.

In order to comply with these immigration regulations, the Department must complete the Export Certification Request. Chad Copeland, TTUHSC Research Compliance Officer/Export Controls Officer will review the questionnaire and instruct the Department on whether to answer NO or YES to the Department Export Control Attestation question below.

Any answers regarding export control at TTUHSC should be addressed to Chad Copeland, at 806-743-4752. As the TTUHSC's Export Controls Officer, he is best able to determine whether the foreign employee will have access to export-controlled technology or technical data.

ICS WILL NOT MAIL THE H-1B OR O-1 PETITION TO USCIS WITHOUT WRITTEN CONFIRMATION, FROM THE EXPORT COMPLIANCE OFFICER, THAT THE EXPORT CERTIFICATION REQUEST FORM IS COMPLETED.

	DEPARTMENT EXPORT CONTROLS ATTESTATION	
My department has completed and submitted the Export Certification Request and TTUHSC's Export Controls Office has instructed us to provide the following responses:		
_	<b>No</b> , a deemed export license is not required from either the US Department of Commerce or the US Department of State to release such technology and technical data to the international employee; or	
	Yes, a deemed export license may be required. By signing below, I certify that an export license may be required to release project technology or technical data to the international employee (beneficiary) and I will prevent access to the controlled technology or technical data by the international employee until and unless I received the required license or other authorization to release it to this beneficiary.	
I certify that I have reviewed the export control regulations applicable to this I-129 petition (H-1B or O-1 petition) and that, to the best of my knowledge, the information I have provided in connection with this petition is true and correct. I understand that the information provided in connection with this petition is subject to the penalties for perjury and/or knowing submission of false statements to the Federal Government including fines up to \$10,000 and imprisonment up to five (5) years, or both.		
Signature:	Date:	
Printed Name:	: Title:	

#### II. ACTUAL WAGE DETERMINATION: (FOR H-1B & E-3 ONLY)

The actual wage determination is the wage paid by the Department to all other employees (in the specific job position) with similar education, specialized knowledge, experience and qualifications. The Employee's salary must fall within the range of actual salaries and cannot be lower.

TTUHSC uses a formal salary structure; the Pay Plan, to create employee categories and wages. Other established salary structures are used for certain groups (e.g. AAMC Survey of Resident/Fellow Stipends and Benefits, or NRSA Stipend Levels (for postdocs).

Please indicate which established salary structure was used to determine the wages to be paid for this position:

 TTUHSC Pay Plan (Human Resources)
 GME Resident/Fellow Salary Plan (AAMC Survey for Resident/Fellow Stipend & Benefits)
 AAMC Report on Medical School Faculty Compensation Survey
 AACP Salary Database (Pharmacy Faculty Salaries)

IF YOU DID NOT USE ANY OF THE ESTABLISHED SALARY STRUCTURES LISTED ABOVE, PLEASE CONTACT ICS AT ICS@TTUHSC.EDU