



TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER™

DEPARTMENT QUESTIONNAIRE & CHECKLIST NONIMMIGRANT VISAS

H-1B

E-3

O-1

TN-1

(FY 2018)

Please return the completed forms and all supporting documents by mail or email to:

**TTUHSC Human Resources
International Employment Services
3601 4th Street, STOP 8100
Lubbock, TX 79430
Ph: (806) 743-2865
Email: IES@ttuhsc.edu**

DEPARTMENT REQUEST FOR EMPLOYMENT VISA – (ALL VISA CATEGORIES)

NAME OF DEPARTMENT/SCHOOL: _____

NAME OF FOREIGN EMPLOYEE: _____

DEPARTMENT FOAP FOR FEDEX BILLING: _____

TYPE OF EMPLOYMENT VISA FILING REQUESTED:

_____ **H-1B**

- New H-1B at TTUHSC (including persons already in H-1B status transferring to TTUHSC)
- H-1B Extension at TTUHSC
- Premium Processing requested (additional USCIS fee applies. See, <http://ttuhsc.edu/hr/IES-IMMGS.aspx>)

_____ **TN (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, <http://ttuhsc.edu/hr/IES-IMMGS.aspx>)

_____ **E-3 (CITIZENS OF AUSTRALIA ONLY)**

- New E-3 at TTUHSC (including persons already in H-1B status transferring to TTUHSC)
- E-3 Extension at TTUHSC
- Premium Processing requested (additional USCIS fee applies. See, <http://ttuhsc.edu/hr/IES-IMMGS.aspx>)

_____ **O-1**

- New O-1 at TTUHSC, (including persons already in H-1B status transferring to TTUHSC)
- O-1 Extension at TTUHSC
- Premium Processing requested (additional USCIS fee applies. See, <http://ttuhsc.edu/hr/IES-IMMGS.aspx>)

DEPARTMENT CHECKLIST:

- _____ Completed General Questionnaire
- _____ Completed Visa Specific Questionnaire
- _____ Copy Department offer letter with proof of acceptance or employment agreement
- _____ Check for USCIS filing fee. See, <http://ttuhsc.edu/hr/IES-IMMGS.aspx> for correct USCIS filing fee and Accounts Payable/Payment Services guidance for requesting immigration checks.

AUTHORIZED SIGNATURE

I HEREBY AUTHORIZE AND FULLY SUPPORT THE ABOVE-REFERENCED EMPLOYMENT VISA PETITION ON BEHALF OF THE FOREIGN NATIONAL EMPLOYEE NAMED ABOVE.

Printed Name

Signature

Date

DEPARTMENT GENERAL QUESTIONNAIRE (ALL VISA CATEGORIES)

Department Name:	
Department Contact: Name: Phone: Email:	
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:	
Work Site Address & STOP #: List <u>ALL</u> Worksite Addresses for Employee	
Annual Salary or Hourly Wage Rate:	
Full-Time/Part-Time:	<input type="checkbox"/> Full-Time <input type="checkbox"/> Part-Time Hours/week:
Employment Start & End Dates	to
Other Special Requirements (licenses, certifications, etc.)	

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

DEPARTMENT - LABOR CONDITION ATTESTATION & TRANSPORTATION COST ATTESTATION

US immigration laws require a US employer to submit a Labor Condition Application (LCA) to the Department of Labor before submitting the H-1B petition to the USCIS. Before IES can submit the LCA, the department must certify the following statements and complete the required information.

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

Department certifies the following with regards to the E-3 or H-1B petition to be filed for _____:

1. The salary being paid to the above named Employee is at least the **actual wage** being paid to all other individuals with similar experience and qualifications for the specific employment in question OR the **prevailing wage** level for the occupation in the area of employment, whichever is higher.
2. The fringe benefits offered to this Employee are equivalent to that offered to other US workers similarly employed.
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 labor dispute in this occupation.
5. Department agrees to assist IES with all offsite worksite LCA postings upon request. Any and all electronic postings will be the responsibility of IES and no posting notice will be required by the Department.
6. Department agrees to comply fully with the terms of the LCA stated above for the duration of the alien's employment in E-3 or H-1B status with TTUHSC.
7. Department fully understands that any willful violation connected with providing inaccurate information in the LCA may incur a severe penalty from the Department of Labor or Department of Homeland Security which will have a long-range impact on TTUHSC's business, future recruitment practices and hiring of foreign nationals.

Authorized Department Contact Signature: _____ Date: _____

Authorized Department Contact Name: _____

B. TRANSPORTATION COSTS ATTESTATION (H-1B or O-1 petitions only)

As required by the USCIS, Department agrees to pay the reasonable cost of return transportation to the foreign national's home country if s/he is dismissed or terminated before the end of the authorized period of H-1B or O-1 employment.

Authorized Department Contact Signature: _____ Date: _____

Authorized Department Contact Name: _____

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

PREVAILING WAGE & ACTUAL WAGE DETERMINATIONS

TTUHSC is responsible for certain record-keeping in accordance with Department of Homeland Security and Department of Labor regulations. All certified Labor Certification Applications (LCA) must be maintained in a public access file for a specific period of time and IES will maintain the public access file and obtain all documents required to be part of that file to ensure TTUHSC is compliant with labor and immigration laws. The public access file must have a record of how the foreign 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 <https://icert.doleta.gov/>.

I. PREVAILING WAGE DETERMINATION:

To assist IES in obtaining an accurate prevailing wage determination, please 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 for the position are not the same as the employee's qualifications as the employee may have additional experience or qualifications.

Employee's Name:	
Job Title:	
Minimum Education Required (Degree & Field of Study):	
Minimum Years of Experience Required:	
Minimum Years of Training Needed (After Degree Rec'd):	
Other Special Requirements:	
Proposed Salary:	
Complete Description of Job Duties:	

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 of 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 IES AT IES@TTUHSC.EDU

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 O-1A 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 questions regarding export control at TTUHSC should be addressed to [Chad Copeland](#), at 806-743-4752. As 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.

IES 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 response:

- No, a deemed export license is not required from either the US Department of Commerce or the US Department of State to release such technology or 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 have 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 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 years, or both.

Signature: _____

Date: _____

Printed Name: _____ **Title:** _____