

[About Us](#) [AWI Home](#)



WORKFORCE
INNOVATION

MyFlorida.com



[Home](#)

ALC

Florida Alien Labor Certification

Prevailing Wage Request Form for Florida Jobs

For quickest response and resolution, please fill out the form completely and accurately.

First Name: Last Name:

E-mail Address:

Phone: () -
 x

Fax: () -

Name of Company:

Job Title:

City of Employment:

Mark one:

HIB:

O*NET/DOT Code:

RIR/PERMENANT:

DOT Code:

PERM ATTESTATION:

Hours per Week:

Frequency of Payment: Hourly

Skill Level:

Degree Required: None

Job Specifications (Job Duties for RIR/Perm. Request):

Training Years:

Experience Years:

Related Occupation Years:

Will Supervise: Yes No

O*NET CODE:
SOURCE:
DETERMINATION:
*DATE:

***THIS DETERMINATION IS VALID FOR FILING APPLICATIONS AND ATTESTATIONS FOR 90 DAYS FROM THE DATE OF DETERMINATION.**

© 2005, Agency for Workforce Innovation, State of Florida | [Contact Us](#)

An equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities.