

Please return to:
Foreign Labor Certification
1100 N. Eutaw Street, Room 201
Baltimore, Maryland 21201
Fax: (410) 767-2060

**STATE OF MARYLAND
DEPARTMENT OF LABOR
LICENSING AND REGULATION**

Please Check One:
 H-1B Professionals
 H-2B Temporary
 Perm. Labor Certification

**E-mail: vthompson@dllr.state.md.us
aweiner@dllr.state.md.us**

PREVAILING WAGE REQUEST FORM

_____ If the job is unionized and covered by a negotiated wage, use the negotiated wage and do not complete this form.

1. Name of Employer : Telephone No: _
2. Employer Address (including City, County and Zip): _
A. Employer Contact Person: B. FEIN: _
C. Address Where Employee Will Work (including City, County and Zip): _
D. Employee's Name (Optional): _

3. Nature of Employer's Business Activity	4. Title of job being filled (Dot code, if known)	5. Basic Hours Per Week	6. Basic Rate of Pay Offered \$ Per
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7. Describe fully the job duties to be performed (start with the most important one first):

8. Working Conditions that Affect the Rate of Pay:

9. State in detail the MINIMUM education (specify the Degree and Major Field of Study), training, experience, and other special requirements for the job:
College Degree Required: _ Major Field of Study:
Experience Required (in years)_

Name of Requestor: Date: 04/23/03

Address (Number, Street, City or Town, Zip Code):

Telephone ()_ Fax: ()_

DLLR web site for Foreign Labor: <http://www.dllr.state.md.us/employment/foreignlabor.htm>

PLEASE DO NOT USE THE SPACE BELOW WHERE THE DEPARTMENT WILL RESPOND TO YOUR REQUEST.
