

PREVAILING WAGE INFORMATION REQUEST FORM

FOR F-1 AND H-1B SPECIALTY OCCUPATIONS

TEXAS WORKFORCE COMMISSION

ALIEN LABOR CERTIFICATION

101 E 15TH STREET 120t

AUSTIN, TX 78778-0001

FAX 512-463-3055

EMPLOYER NAME, ADDRESS, CITY, STATE , ZIP, FAX AND BUSINESS TELEPHONE NUMBER , NAME & TITLE OF CONTACT PERSON			
NATURE OF EMPLOYERS BUSINESS ACTIVITY		TITLE OF JOB BEING FILED	
HOURS AND BASE RATE OF PAY OFFERED		ADDRESS WHERE WORK WILL BE PERFORMED	
DESCRIPTION OF JOB DUTIES:			
MINIMUM EDUCATION REQUIRED (DEGREE & FIELD OF STUDY)	LICENSE REQUIRED/UNIONIZED?	MINIMUM EXPERIENCE REQUIRED	NUMBER OF EMPLOYEES SUPERVISED BY JOB
ATTORNEY NAME, ADDRESS, CITY, STATE , ZIP, FAX AND BUSINESS TELEPHONE NUMBER (REPRESENTING EMPLOYER)			

DO NOT WRITE BELOW THIS LINE

SERVICE CONTRACT ACT _____ \$ _____	DOT CODE
DAVIS BACON ACT _____ \$ _____	DOT TITLE
UNION WAGE _____ \$ _____	COUNTY/STATE
OES _____ \$ _____	DATE
OTHER _____ \$ _____	
ANALYST <div style="text-align: center;">DORA CASTANEDA OR ANDREA POWER</div>	
CONTACT TELEPHONE NUMBER <div style="text-align: center;">512-475-3473 512-463-3792</div>	

Note: Prevailing wage determinations are made in accordance with Federal Regulations and based on the best information available at the time of request. **If the wage source is based on Service Contract Act, Davis Bacon Act or Union contract the employer must pay the prevailing wage or greater.** This prevailing wage rate is valid for filing applications and attestations for 90 days from the above date. Prevailing wages for Permanent Labor Certification applications are made when the application is **processed** by the SESA.