

LABOR CERTIFICATION QUESTIONNAIRE
(ALL BLANKS MUST BE FILLED IN)

1. **Legal Business Name (Parent Company):** _____
 - a. Trade Name/Assumed Name or DBA, if applicable: _____
2. FEIN: _____
3. Owner Name: _____
 - a. Phone #: _____
 - b. Email: _____
4. Primary H-2B Contact for The Kershaw Law Firm:
Full Name (including middle): _____
Job Title: _____ Email: _____
Office #: _____ Cell #: _____
5. Alternate H-2B Contact for The Kershaw Law Firm (if applicable):
Full Name: _____
Job Title: _____ Email: _____
Cell #: _____
6. Full Legal Name of Person Signing Paperwork (including middle): _____
 - a. Job Title: _____
7. Company's Main Physical Address: _____
City: _____ County: _____ State: _____ Zip Code: _____
8. Overnight Delivery PHYSICAL address, if different from above (where we will FedEx documents):
Address: _____ City: _____ State: _____ Zip Code: _____
9. Company's Mailing Address (If different from above): _____
City: _____ State: _____ Zip Code: _____
10. Will worker be working in (check one): a fixed location OR in area job sites
If at a fixed location give address if different from #7: _____
City: _____ County: _____ State: _____ Zip Code: _____
Is the above address accessible to public transportation? yes no
If in area jobsites, answer the following:
At what address will the workers meet? (if different from #7): _____
City: _____ County: _____ State: _____ Zip Code: _____
Additional Counties: 1. _____; 2. _____; 3. _____
List additional Counties on a separate sheet of paper.
Is the above address accessible to public transportation? yes no
11. Company's Nature of Business: _____
 - a. Is there a union for this type of business in your area? yes no
 - b. If yes, then we need: name of local: _____ # of local: _____
City: _____ State: _____
 - c. Is this job offer subject to any collective bargaining agreement (union)? yes no

- d. Company's North American Industry Classification System (NAICS Code): _____
- e. Is your company a Federal contractor? [] yes [] no
12. Company's State Workforce Agency Job Posting/Job Order Log-In Information (you may need to register, if you have not done so already. Call our office for instructions):
 User ID: _____ Password: _____
13. Total Number of Temporary Workers Needed and any reason for change from last year:
 # Needed _____ Reason for change: _____
14. Dates for which you need your peak-load workers and any reason for change in dates from last year:
 Workers needed From: _____ To: _____
 Reason for change (if any): _____
15. Why does your work load increase during these dates, and why does it slow down during your slow months?

16. Job Title to be filled: _____
17. Skill Level (**check only one**):
 a. Entry Level (no experience required) _____
 b. Qualified (some experience required) _____ how many mo. of experience required: _____
 c. Supervisor/Crew Leader _____ how many mo. of experience required: _____
 Number of employees H-2B workers will supervise: _____
18. **Job Title** of the H2B workers' immediate **supervisor**: _____
19. Briefly describe the job duties of the position to be applied for (if more than one job description is desired you must fill out a separate fee agreement and questionnaire for each job description and skill level): _____

20. Lifting Requirement: # _____ lbs. required
21. Pre-conditions to employment (**only if existing company policies for all employees**): [] None
 [] Pre-hire Drug Testing [] Pre-hire Criminal Background Check [] Other: _____
22. Total Hours per week: _____
23. Work Schedule: (Must be at least full-time)
 [] 8:00 am - 5:00 pm, M-F
 [] _____ am - _____ pm
 If other than M-F which days will workers work: _____
24. Is on the job training provided? [] yes [] no
25. How do you pay the workers? [] weekly [] bi-weekly
26. Do you assist any workers, H2B or U.S., with lodging, etc.? [] yes [] no
 If yes, how? [] locating [] pay advances [] free housing [] low cost housing

- [] other, explain _____
27. Do you provide any benefits to any worker, U.S. or H2B? [] yes [] no
- a. [] Housing – explain _____
- a. [] Health Insurance – explain _____
Amount Employer Pays: _____ Amount Employee Pays: _____
- b. [] Bonuses – explain _____
- c. [] Commission – explain _____
- d. [] Laundry service for uniforms – explain _____
- e. [] Other Assistance – explain _____
- f. [] Other (example, pay advances) – explain _____
28. Are there any other deductions from the workers' paychecks other than payroll taxes and deductions required by law? [] yes [] no
- If yes, explain:

29. **Gross Sales** for Most Recent Year Filed: _____
30. **Net Profit** for Most Recent Year Filed: _____
31. **If** your Business is a New Business give your most recent years:
- a. Gross Personal Income: _____ b. Net Personal Income _____
32. Year Business was Established: _____
33. Current Total Number of Employees: _____
34. Have you attempted to advertise for U.S. workers to fill the above positions? [] yes [] no
- When? _____ How? _____ Where? _____
- What response did you receive? _____
35. Has anyone been hired by your company for this position with less than the above criteria?: [] yes [] no
36. What is the name and phone # of your local newspaper? (must have a **Sunday** edition)
- _____
37. How will you recruit your **H2B** workers? [] Referrals from existing workers
[] Recruiter [] Returning Workers [] Word of Mouth [] Other
38. What country will you be bringing your workers from? _____
39. Has your company ever used the H2B Program before? [] yes [] no
- If yes, then what was the last year you applied? _____ (You will need to send previous paperwork)
40. How did you hear about us? (check one)
- [] Postcard [] Expo [] Publication [] Referral [] Other
- Which Publication: _____ Who Referred _____
- Other: _____

Signature

Date