

Actual Wage Calculation & Agreement of Notification of Change in Employment

The labor condition application is the government's way of insuring that the H-1B or E-3 holder is being paid an adequate salary for the work done. This is done by calculating the prevailing wage for this job title and the actual wage being offered at Columbia. H-1B and E-3 nonimmigrants will be paid at least the actual wage level paid by the employer 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. An Actual Wage Calculation sheet must be completed for each H-1B and E-3 applicant.

The *prevailing wage* level is the average salary paid to all persons equally or substantially equally employed. The University uses well established private surveys or the New York State Department of Labor to determine the prevailing wage, and has a copy of the prevailing wage determination on file. Prevailing wage determinations need to be updated every three years or each time a labor condition application is filed, whichever comes first, throughout the period of employment of the H-1B or E-3 and the wages must be adjusted, if necessary.

The *actual wage* level is that paid by the employer to all other individuals with similar experience and qualifications as the H-1B or E-3 nonimmigrant for the specific employment in question at the place of employment (usually the department). The hiring department must submit a written explanation of how this wage was determined. This explanation should include information on other similarly employed persons with no names mentioned.

Name of Dept.: _____ Dept #: _____ Contact Person: _____

Phone#: _____ Contact email: _____

Applicant's Name: _____ Rate of Pay (per annum) for 1st yr.: _____

University Appointment Title: _____ Is this a tenure track position? _____

Full-time _____ Part-time _____ # Hours/week _____

Is employee receiving benefits (health insurance, etc.)? _____

Full Period of Employment Requested: from: _____ to _____

The start date is usually either the day after the scholar's current status expires, if he or she is already at Columbia in another status, or the start of the appointment, if the scholar will be entering the U.S. or coming initially to Columbia in H-1B or E-3 status. Dates should not exceed 3 year period. (Please call the ISSO for further information.)

Location(s) of Employment: _____

(Fill in address of place of employment. If there is more than one site, list all.)

Has affirmative action approval been granted? Yes _____ No _____

If no, you must obtain approval before a petition can be filed for all full-time employees except Post Doctoral Research Scientist/Fellows in departments other than Physics and LDEO.

Wage information:

Please provide the salary range of individuals within your department with the same job title and similar qualifications as the applicant: \$ _____ to \$ _____

Please check which of the following factor(s) were considered in determining the applicant's salary for similarly employed individuals (usually those with the same title).

_____ Degrees earned _____ Area of specialization
_____ Previous work experience _____ Comparable rate of pay at similar institutions
_____ Determined by funding source (grant, etc.)

If the above does not fully describe the factors used to determine the salary for similarly employed individuals, please use an attached sheet of paper to explain your compensation system.

I hereby certify that the salary listed above reflects the wage level paid to all other individuals with similar experience and qualifications working in this Department/Laboratory. If there is more than one wage paid, I am able to explain the reason(s) for this differential in wage rates. If required to do so, I am able to provide documentation, which must include the names and payroll records of similarly employed individuals, to the Department of Labor to verify these statements.

I hereby certify that if there is a substantial change in the employee's job description, salary or any change in the employee's job title that I will contact the ISSO so that an amended petition can be filed as required by law. I understand that if I do not notify ISSO, the University and my department may be fined by the federal government and the University's right to hire employee's in the H-1B or E-3 category may be revoked.

Name and Signature of Chair of Dept. or Person with Hiring Authority

Date