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"H-1B" Visa Employer/Petitioner Questionnaire

"H-1B" Nonimmigrant Visa Information -- [English](#)

"H-1B" Nonimmigrant Visa Information -- [Japanese](#)

EMPLOYER (U.S. PETITIONER) INFORMATION

1. Contact person:

Name: _____
Title: _____
(tel): _____
(fax): _____
(email): _____

2. Individual who will be SIGNING
legal documents/forms (if different):

Name: _____
Title: _____
(tel): _____

3. Name of the organization/business
that will employ the H-1B specialist:

Organization
name (legal): _____
[] Main/Parent company [] Subsidiary
[] Branch office [] Affiliate [] Agent/Rep.
DBA/other name: _____
Address: _____
(street/suite)

(city/state)

(zip code) _____ USA
Homepage: _____

3. Business Activity/Financial
Information:

Date of establishment of business: _____
State of incorporation/registration: _____
IRS Federal Taxpayer ID No. (FEIN): _____
[] Profit
[] Non-Profit (* will require documentation to establish non-profit status).

Number of employees:

(last year): _____ (current year): _____ (full-time)
_____ (part-time)
_____ (other)

Income/revenue:

GROSS: _____ NET: _____

For fiscal -or- calendar year ending: _____

If fewer than 3 (three) full-time employees and/or considered "new/start-up" business (less than 1-2 years of operation), the following additional information.
(* May also require additional documents, such as copy of lease, business tax returns, payroll chart, etc.):

Assets: _____

Net worth: _____

Business nature of your organization (services, products, etc.):

(line 1) _____

(line 2) _____

(line 3) _____

Also: brochure/pamphlet attached -or- documentation available on home page

4. Employment Information:

Name of intended employee: _____

Employment location: place of business/main office multiple venues
 different location (specify): _____

Division/Dept.: _____

Position/Title: _____
 new position replaces an employee
 same position as another employee

Supervisor's Job title: _____

Responsibility information: employee will not supervise others.
 employee will supervise others:
- number of those supervised: _____
- titles of those supervised: _____

Describe the duties & activities of the position:

(line 1) _____

(line 2) _____

Any unique/special responsibility? _____

Minimum Requirements for position:

[] degree: _____ major: _____

[] AND [] OR

[] experience/yrs.: _____

[] AND [] OR

[] license/certificates: _____

[] AND [] OR

[] other/skills: _____

Salary: Set Salary of: \$ _____ [] full-time [] part-time
[] yearly* [] monthly [] hourly

* If raise in salary within 1 (one) year of employment is expected, how much will be the annual salary?: \$ _____

- **OR** -

Other arrangement (explain): _____

Benefits: _____

\$ _____ (equivalent monetary amount)

Intended employment period:

_____ - _____
(start date: mo./date/yr.) (end date: mo./date/yr.)

5. Additional Information:

Current number of H-1B employees: _____ [] none
How many have the same job title? _____

Within the past six (6) months, has any employee held the same position/title who has left the business?

[] no [] yes: please provide the following information:

[] terminated [] resigned

[] other reason: _____

date left: _____

6. Information to Determine H-1B visa compliance, usage, and filing fees (for U.S. INS' purposes):

H-1B DEPENDENT EMPLOYER QUESTIONS

I have 25 or fewer full-time equivalent employees who are employed in the U.S. AND employ MORE than 7 H-1B nonimmigrants. Yes No

I have at least 26 but not more than 50 full-time equivalent employees who are employed in the U.S. AND employ MORE than 12 H -1B nonimmigrants. Yes No

I have at least 51 full-time equivalent employees who are employed in the U.S. AND employ H - 1B nonimmigrants in a number that is EQUAL to at least 15% of the number of such full-time equivalent employees. Yes No

In the past, I have been found to be a willful violator by the Dept. of Labor (an employer whom the Secretary of Labor has found, after notice and opportunity for a hearing, to have willfully failed to meet a condition of the LCA). Yes No

FILING FEE EXEMPTION QUESTIONS:

The business is an institution of higher education. Yes No

The business is a nonprofit organization or entity related to or affiliated with an institution of higher education, as such institutions of higher education. Yes No

The business is a nonprofit research organization or a governmental research organization. Yes No

The business is a primary or secondary education institution. Yes No

The business is a non-profit entity that engages in an established curriculum- related training of students registered at such an institution. Yes No

NUMERICAL LIMITATION EXEMPTION QUESTIONS

The business is an institution of higher education. Yes No

The business is a nonprofit organization or entity related to or affiliated with an institution of higher education, as such institutions of higher education. Yes No

The business is a nonprofit research organization or a governmental research organization. Yes No

Documents normally required: business brochure/pamphlet/literature.
If necessary: business lease, payroll documents, financial documents, business plan, etc.

Marcos, Negrón & Akaike, LLP is a recipient of the American Bar Association's Pro Bono Publico Service Award.

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