This prevailing wage determination may be used for more than one application, as long as all job related details and the area of intended employment remain the same.

Please Return To:
WI&A - PW Unit
Suite 300, Courtland Building
148 Andrew Young International Blvd., N. E.
Atlanta, GA 30303-1751
Telephone: (404) 232-3875 Ext. 21262
FAX: (404) 232-3885
Email: GeorgiaPrevailingWage@dol.state.ga.us

Agency Official Completion Date
Prevailing Wage Expires

Source: Service Contract Act

<table>
<thead>
<tr>
<th>Experience</th>
<th>Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>(MUST STATE EXACT NUMBER OF YEARS AND/OR MONTHS):</td>
<td></td>
</tr>
</tbody>
</table>

Any other special requirements:

Working Conditions that Affect the Rate of Pay (INCLUDING HOW MANY WORKERS ALIEN WILL SUPERVISE)

State in detail the minimum requirements, not the Alien’s qualifications. Any alternative requirements must be filed on a separate request.

| Education (Degree/Major Field of Study): | |
| Training: | |
| Experience (MUST STATE EXACT NUMBER OF YEARS AND/OR MONTHS): | |

Any other special requirements:

Check if employer’s wage is based on a collective bargaining agreement. If checked, state name, number, address and telephone number of Union Local.

DEPARTMENTAL ACTION TO PROVIDE A PREVAILING WAGE DETERMINATION

<table>
<thead>
<tr>
<th>Request Number</th>
<th>SOC Code</th>
<th>Skill Level</th>
<th>SVP:</th>
</tr>
</thead>
<tbody>
<tr>
<td>SOC Title</td>
<td></td>
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</tbody>
</table>

The prevailing wage for the job described above is __________________________ per __________________________ per.

Employers must pay 100% or more of all wage determinations.

<table>
<thead>
<tr>
<th>Source:</th>
<th>Collective Bargaining Agreement</th>
<th>Service Contract Act</th>
<th>OES</th>
<th>Employer Provided survey:</th>
<th>Approved</th>
<th>Not Approved</th>
</tr>
</thead>
</table>

<table>
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DOL-1687 (R-6/08)
ITEMIZED INSTRUCTION FOR COMPLETING PREVAILING WAGE REQUEST FORM

(To be completed by Employer or Employer Representative)

If the job is unionized and covered by a negotiated wage, use the negotiated wage and do not complete this Prevailing Wage Request Form.

PLEASE CHECK WHICH OF THE RESPONSE METHODS YOU DESIRE.

PLEASE CHECK THE TYPE OF WORK VISA IN THE UPPER RIGHT CORNER.

Item 1. Name of Requestor. Enter the name of the person (employer or employer representative) requesting the prevailing wage determination. Include the requestor’s name, date of the request, complete mailing address, telephone number, and FAX number.

Item 2. a. Name of Employer. For worksite employer, enter full name of business, firm, organization, or if an individual, enter name used on legal documents. THIS IS MANDATORY.

b. Telephone Number.

c. Address Where Alien Will Work. The work place address should include city, county and ZIP code.

Item 3. a. Nature of Employer’s Business Activity. Enter Standard Industrial Classification (SIC) Code or a brief nontechnical description, i.e., retail trade, software industry, biotechnology, university, financial institution, hospital, or community service organization, including for profit or non-profit status.

b. Telephone Number.

c. Size of health care facility (for example, volume of business or number of beds);

d. Type of health care facility (for example, hospital or nursing home);

e. Address Type of health care facility (for example, hospital or nursing home);

Item 4. a. Nationality of Applicant. Enter the country of national origin of the alien applicant.

b. Alien’s Name. Enter full name with family name in capital letters and given name in small letters. Only one applicant per request.

Item 5. a. Title of Job Being Filled. Enter the common name or payroll title of the job being offered.

b. Basic Hours Per Week. Show the usual hours of work required on a weekly basis so that a standard work week can be established for the job.

c. Basic Rate of Pay Offered. Please enter a basic rate of pay, such as $15.00 per hour, $2,500 per month, or $37,500 per year. The wage offered cannot be based on overtime, commission, bonuses, or other incentives unless the employer guarantees a minimum wage paid on a weekly, biweekly, or monthly basis. Only the minimum amount guaranteed to the employee can be reported.

d. Basic Rate of Pay Offered. Please enter a basic rate of pay, such as $15.00 per hour, $2,500 per month, or $37,500 per year. The wage offered cannot be based on overtime, commission, bonuses, or other incentives unless the employer guarantees a minimum wage paid on a weekly, biweekly, or monthly basis. Only the minimum amount guaranteed to the employee can be reported.

e. Address Where Alien Will Work. The work place address should include city, county and ZIP code.

Item 6. Describe Fully the Job Duties to be Performed. Analyze the duties and responsibilities in terms of actions to be performed and the objects of those actions. You may want to consult the O*NET Classification System or the Standard Occupational Classification System to assist in the development of a job description that can easily be categorized by a Prevailing Wage Analyst. In order to standardize the way employers describe jobs on the Prevailing Wage Request Form, the following additional guidelines are suggested:

a. Where there are several duties, start with the most important one first. Please differentiate between major and minor duties.

For example, Tests and analyzes chemical properties of raw materials or manufactured products for conformance to plant standards; conducts controlled experiments for the purpose of devising new production methods..."

b. Identify the tools, equipment, and machines the worker uses.

c. Indicate the skill level (complexity) and degree of supervision required to perform the job duties and responsibilities. For example, "...performs a variety of routine tasks designed to provide experience in methods and procedures...receives specific and detailed instructions with work closely monitored..." (entry level); "...performs work with clear and specified objectives requiring selection of standard techniques and established procedures...work is reviewed closely to ensure accuracy and conformance with required procedures..." (junior level); "...independently performs a broad range of moderately complex assignments using standard methods or procedures...work is reviewed for application of sound judgment..." (intermediate or journey level); "...solves a variety of complex problems requiring judgment in the selection and modification of standard techniques and procedures...assignments are given with instructions as to the general results expected and work is reviewed for effectiveness in meeting requirements..." (senior level); "...solves highly complex problems requiring diversified knowledge and advanced techniques...decisions are made independently where no precedents exist..." (lead level).

Specify the occupational title of the person who will supervise the worker.

d. For jobs requiring supervisory duties, the employer needs to describe the activities the incumbent will supervise, the extent of authority to hire, fire, train, schedule, and evaluate, as well as the numbers and occupations of workers supervised. (A supervisory position falls into an occupational category distinct from the occupation of the worker supervised.

For example, "...supervised five lead Software Engineers and their project teams in the development of different aspects of a new network software...", "...supervises a clerical group of 20 workers in payroll, employee benefits, and customer relations units, including three workers with lead responsibilities..."

Item 9. Working Conditions that Affect the Rate of Pay. Some working conditions (for example, working in cold temperatures or with dangerous chemicals) result in Hazard Pay Differentials. Other working conditions (for example, evening or weekend hours or rotating shifts) result in Shift Pay Differentials. Additional examples of conditions that affect determinations for H-1A Nurses Prevailing Wage Requests are:

a. Number of workers supervised;

b. Type of health care facility (for example, hospital or nursing home);

c. Size of health care facility (for example, volume of business or number of beds);

d. Type of health care facility (for example, hospital or nursing home);

Item 10. State in detail the MINIMUM education, training, experience, and other special requirements for any worker to satisfactorily perform the job duties described in Item 8. Any alternative requirements must be filed on a separate request. Identify licensing or certification needed, minimum foreign language proficiency, or accuracy and speed as reflected in test results. If you require a college degree, please specify by name of degree and major field of study. The number of months and/or years of service required must be provided.

Do not exaggerate the total time required for education, training and experience if they can be acquired concurrently. Do not use phrases such as “familiar with,” “knowledgeable of” or “able to.” Do not include restrictive requirements which are not actual business necessities for performance of the job and which would limit consideration of otherwise qualified U.S. workers.

Examples: "...must possess or be eligible for State Civil Engineer License...", "fluent in Mandarin Chinese...", "...must have minimum of 400 hours flight time including 200 hours as pilot-in-command and 100 hours tailwheel...", 

The rest of this form is for DEPARTMENTAL ACTION TO PROVIDE A PREVAILING WAGE DETERMINATION. This action will determine the prevailing wage or that an occupational wage survey must be conducted before a prevailing wage determination can be made.