



**University at Buffalo**  
*The State University of New York*  
**Office of International Education**  
 Immigration Services

## REQUEST FOR ACTUAL WAGE DATA FOR LABOR CONDITION APPLICATION

**To:** Labor Condition Application File Of \_\_\_\_\_  
*Employee's name*

**From:**

**Subject:** Position Title \_\_\_\_\_ in the Department of \_\_\_\_\_

**Date:**

There are \_\_\_\_\_ other employees in the Department of \_\_\_\_\_ with the job title and duties of \_\_\_\_\_. The wage range for these employees is \$\_\_\_\_\_ to \$\_\_\_\_\_.

Within this range, an individual salary is determined by taking into consideration various factors, specifically (check all that apply):

- \_\_\_\_\_ Years of experience in this field
- \_\_\_\_\_ Level of formal education
- \_\_\_\_\_ Level of independence involved in research
- \_\_\_\_\_ Importance of research and monetary value of grant
- \_\_\_\_\_ Knowledge of specialized techniques
- \_\_\_\_\_ Number of employees supervised
- \_\_\_\_\_ Other (please enumerate)

\_\_\_\_\_  
 Signature of Supervisor

\_\_\_\_\_  
 Supervisor Name & Title

\* Please return this completed form with your H-1B packet to Immigration Services, 210 Talbert Hall, North Campus.