



Visa & Immigration Service Advising
1 Old Dominion University
Norfolk, VA, USA 23529
T: 757.683.4756, F: 757.683.5196
www.odu.edu/visa, intlstu@odu.edu

H-1B Application *Employer Portion*

Employer Information and Checklist

Please review the following information regarding H1B applications. Please contact intlstu@odu.edu with any questions. We are happy to speak with departments, prospective employees, or newly hired individuals regarding the process/timelines/special circumstances.

The H1B visa is a work visa for individuals working in a “specialty occupation.” To qualify as a specialty occupation, the position must meet one of the following:

- **A baccalaureate or higher degree or its equivalent is normally the minimum requirement for entry into the particular position;**
- **The degree requirement is common to the industry in parallel positions among similar organizations or, in the alternative, an employer may show that its particular position is so complex or unique that it can be performed only by an individual with a degree;**
- **The employer normally requires a degree or its equivalent for that positions; or**
- **The nature of the specific duties are so specialized and complex that knowledge required to perform the duties is usually associated with the attainment of a baccalaureate or higher degree.**

Due to increased scrutiny of H1B status, any petitions (especially those for staff/administrative faculty positions) are likely to receive a Request for Evidence (RFE.) A Request for Evidence will delay the processing of the application by 3 weeks to 2 months. Depending on the complexity of the Request for Evidence, the VISA office may request use of outside legal counsel for assistance.

Due to increased processing times for H1B applications, VISA requires departments to pay premium processing fees for initial (change of status) applications (an additional \$2805 paid to Department of Homeland Security). Please note the following **estimated processing timeline** that apply to H-1B visa applications:

Regular Adjudication*

VISA: 8 weeks

USCIS: 20 weeks

TOTAL: 28 weeks (7 months)

Premium Processing Adjudication*

VISA: 8 weeks

USCIS: 3 weeks

TOTAL: 11 weeks (2.5 months)

***Adjudication** means that USCIS issues a response to the petition, which could be an approval, denial, intent to deny or Request for Evidence (RFE). An RFE will add 3 weeks to 2 months to the processing times listed.

In order to begin the application process, the following items must be sent to Visa & Immigration Service Advising (VISA):

1. Complete H-1B Application Employer portion (attached)
2. **For STAFF Positions:** Position description and copy of job announcement, including education and work experience requirements
3. **For ODU Research Foundation-Funded Positions:** An offer letter is also needed from HR in ODU Research Foundation

Application forms can be sent to Dragas 2006 or scanned to intlstu@odu.edu.

A separate list of required documentation needed from the employee is provided in the Employee Portion (separate form).



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H-1B Application Employer Portion

Information about Employing Department

Department's Chair Last Name _____ First Name _____

Department _____ Phone _____ E-Mail _____

Departments and Colleges need to be aware of the following items when requesting an H-1B visa for a prospective employee. Please **read and initial each item**, indicating that you understand the requirements and sign at the bottom.

- ☐ Request employment only for a period in which you currently have funding (call VISA for more information, if needed).
- ☐ Maximum initial period of employment is 3 full years and the status may be renewed for an aggregate total of 6 full years.
- ☐ The prospective employee cannot begin employment or volunteer in the position until the H-1B approval or transfer has been received.
- ☐ If you plan to extend the period of employment, please contact the office six months in advance of the expiration date.
- ☐ Should you need to terminate an employee **PRIOR** to the period of stay requested due to lack of funds or poor performance, **the department will be responsible for expenses related to the individual's return transportation to his/her home country.**

Signature of Department's Chair _____ Date _____ Name/Signature of College Dean _____ Date _____

Name of Fiscal Tech _____ Contact Information _____

Additional Items To Be Submitted

Documentation of Position

- o **Staff Positions:** EWP and complete copy of job announcement that includes minimal educational and work experience required for position
- o **Faculty Positions:** Departmental letter on behalf of employee (an example is included in the packet); if the position is funded by Research Foundation (partly or fully), a letter is also needed from HR in ODURF

Job/Employee Information

Employee Name: _____ UIN: _____

Current E-Mail Address & Phone: _____

Official Job Title: _____

Brief non-technical job description: _____

Department address: _____

If employee will work at any other site besides the department, please provide the address: _____

Is this a full-time position? ☐ Yes ☐ No If **no**, number of hours per week _____

Actual wages \$ _____ Is the rate of pay hourly? ☐ Yes ☐ No

Will employee receive benefits? ☐ Yes ☐ No

Who is the employer? ☐ ODU ☐ OODU Research Foundation

Will this position supervise any full-time employees? ☐ Yes ☐ No If **yes**, how many? _____

Dates of intended employment as H-1B: From _____ To _____ (MM/DD/YY)

Minimum degree & field of study required for this position: _____

Preference for degrees cannot be accepted.

Experience required for position _____ yrs. (progressive years outside experience)

Is additional training needed to perform this job outside of degree training?

☐ Yes ☐ No If **yes**, what type? _____

When & Where did candidate received degree? _____

Is employee currently employed at ODU/ODURF in this position? ☐ Yes ☐ No

If **yes**, years in current position _____ Position is funded by: ☐ OODU ☐ ODURF ☐ Both

Is this position a Temporary Worker as defined by ODU/ODURF? ☐ Yes ☐ No



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Actual Wage Determination System Memo

(For Public Inspection File)

For Faculty Positions: Indicate which factors are used to determine wages paid of similarly employer individuals. Responses should be detailed. Include copies of any applicable university salary/grade scales. Describe how these factors apply to the foreign employee. **DO NOT INCLUDE THE EMPLOYEE'S NAME ON THIS PAGE AS IT IS FOR PUBLIC INSPECTION.**

For Staff Positions: Also, provide the Position Description and the Human Resources Classification memo.

Factors Considered (Check all that apply)	Describe how factors affect placement on wage range	Describe how the individual fits into wage scale based on own qualifications <i>Do not include employee's name as information will be in public file.</i>
Experience <input type="checkbox"/> Length of experience <input type="checkbox"/> Breadth of experience <input type="checkbox"/> Type of experience		
Qualifications <input type="checkbox"/> Level/Subject areas of degrees <input type="checkbox"/> Skills, abilities, specific expertise <input type="checkbox"/> Specialized knowledge		
Job Responsibility/Functions (Specify) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Other Factors (Specify) <input type="checkbox"/> Professional Recognition <input type="checkbox"/> Complexity of Project <input type="checkbox"/>		

The **annual salary** for this position is \$_____ for which the University is filing an H-1B petition. There are _____ (number of employees listed on previous page) employees with the same job title and duties.

The actual wage range for these employees is: \$ _____ (lowest salary on next page) to \$ _____ (highest salary from next page).

Within this range, an employee's salary is determined by taking into consideration the factors above. If there are no other employees, the actual wage is the employee's salary or the salary range from the HR memo, if a staff position.

I hereby certify that the salary reflects the wage level paid to other employees with similar experience and qualifications working in the Department. If required to do so, I am able to provide documentation that will include the names and payroll records of similarly situated employees to the Department of Labor to verify these statements.

Department Chair Signature _____ Name: _____ Date: _____



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Identification of Similarly Employed Workers

(Confidential - for DOL Inspection file)

Position Title: _____

In the spaces below, list all employees in the Department who hold the above listed title
AND:

1. Have the same type of duties and responsibilities as the beneficiary of this petition AND
2. Have qualifications, education, and experience similar to the beneficiary of this petition.

This page is used to determine the actual wage for this position. Use additional pages, if needed.

<u>NAME</u>	<u>START DATE</u>	<u>SALARY</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

Further, I attest to the following:

1. The H-1B non-immigrant will be paid the higher of either the actual wage (within the range of salaries on this page or the official salary range for the position as listed on the HR memo for staff positions) or the prevailing wage as determined by the Department of Labor and is eligible for the same benefits as other similarly employed individuals.
2. The employment of this individual will not adversely affect working conditions of the individuals listed above or US workers.
3. The work schedule of this individual is the same as similarly employed individuals.

Department Chair Signature _____ Name: _____ Date: _____