

**WAGE DETERMINATION WORK SHEET**

**This worksheet must be completed by the hiring department. This will be kept in OIPS as part of the required Department of Labor Public Inspection File.**

1. Title of position offered to alien: \_\_\_\_\_

2. Number of other employees in department with this title: \_\_\_\_\_

3. Total number of other so-titled employees who have similar duties and responsibilities and who have similar education, qualifications and experience for the specific employment:

\_\_\_\_\_

4. Salary of prospective employee: \$ \_\_\_\_\_ per \_\_\_\_\_

5. Please describe in detail the system used by your department to determine the salary paid to the individual for whom you are requesting H-1B status. Factors to take into consideration may include length, type and breadth of experience, level of skills and specialized knowledge, level/subject area of advanced degrees, job responsibility and function.

If your department follows a particular written GMU or state salary schedule or guideline in establishing employee wage rates, please also attach a copy of that schedule.

If your department or institute uses a separate salary schedule, such as NIH Salary Scale, please attach the schedule.

6. Year That Wage Scale was Published \_\_\_\_\_

\_\_\_\_\_  
**(Signature)**

\_\_\_\_\_  
**Title and Department**

\_\_\_\_\_  
**Date**