



**Nnaka & Associates,
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A FULL SERVICE LAW FIRM



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EMPLOYMENT IMMIGRATION INTAKE QUESTIONNAIRE

Please provide the following information:

Information About Prospective Employer (Petitioner)

1. Name of Company or Organization: _____
2. Full Address of Employer: _____
3. Phone Number of Employer (including extension): _____
4. Employer Contact Information: _____
 - a. Full Name: _____
 - b. Address: _____
 - c. Phone Number (including extension): _____
 - d. E-mail address: _____
5. IRS Tax# (FEIN – Federal Employer Identification Number): _____
6. Type of Business: _____
7. Date Established: _____
8. Current # of employees: _____
9. Is the Employer a closely held corporation, partnership, or sole proprietorship in which the alien has an ownership interest, or is there a familial relationship between the owners, stockholders, partners, corporate officers, incorporators, and the alien? _____
10. Gross Annual Income: _____
11. Net Annual Income: _____
12. NAICS Code: _____
13. Job Title of position to be hired: _____

14. Nontechnical Description of Job: _____

15. Prevailing wage for position (if known): _____

a. Prevailing wage source: _____ b. Determination date: _____ c. Expiration date: _____

16. Wage Offered:

From: \$ _____ **To: (Optional)** \$ _____ **Per: (Choose only one)**
_ Hour _ Week _ Bi-weekly _ Month _ Year

17. Address where individual will work if different than address above: _____

18. Is this a full time position? _____

If no, how many hours per week for the position: _____

19. Is this a permanent position? _____

20. Is this a new position? _____

21. Education: minimum level required:

_ None _ High School _ Associate's _ Bachelor's _ Master's _ Doctorate

_ Other. If other, specify the education required: _____

22. Major Field of Study: _____

23. Is training required in the job opportunity?

a. If yes, how many months of training is required? _____

b. Indicate the field of training: _____

24. Is experience in the job offered required for the job?

a. If yes, how many months experience is required? _____

25. Is there an alternate field of study that is acceptable?

a. If yes, specify the major field of study: _____

26. Is there an alternate combination of education and experience that is acceptable?

a. If yes, specify the alternate level of education that is acceptable:

_ None _ High School _ Associate's _ Bachelor's _ Master's _ Doctorate _ Other. If other, specify the education required: _____

b. If applicable, indicate the number of years' experience acceptable: _____

27. Is a foreign educational equivalent acceptable? _____

28. Is experience in an alternate occupation acceptable? _____

a. If yes, number of months experience in alternate occupation required: _____

b. Identify the job title of the acceptable alternate occupation: _____

29. Job duties: _____

30. Are the job opportunity's requirements normal for the occupation? _____

If no, provide documentation demonstrating that the job requirements are supported by business necessity.

31. Is knowledge of a foreign language required to perform the job duties?

If yes, provide documentation demonstrating that the language requirements are supported by business necessity.

32. Specific skills or other requirements: _____

33. Does this application involve a job opportunity that includes a combination of occupations? _____

34. Is the position identified in this application being offered to the alien? _____

35. Does the job require the alien to live on the employer's premises? _____

36. Is the application for a live-in household domestic service worker? _____

Information About Prospective Employee (Beneficiary)

1. Full Name: _____

2. Complete Address: _____

3. Phone number: _____

4. Country of Birth: _____

5. Country of Citizenship: _____

6. Date of Birth: _____

7. List spouse and all children related to Alien for whom the petition is being filed:

Name	Relationship	Date of Birth	Country of Birth
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8. Class of Admission: _____

9. Alien Registration Number (if any): _____

10. Social Security Number (if any): _____

11. Alien Admission number (I-94): _____

12. Current Nonimmigrant Status: _____

13. Date of arrival: _____

14. Date authorized to stay: _____

15. Education: highest level achieved relevant to the requested occupation:

None High School Associate's Bachelor's Master's Doctorate

Other. If other, specify the education required: _____

16. Specify Major Filed(s) of Study: _____

17. Year relevant education completed: _____

18. Institution where relevant education specified in Question 11 was received: _____

19. Address of conferring institution: _____

20. Did the prospective employee complete the training required for the requested job opportunity? _____

21. Does the prospective employee have the experience as required for the requested job opportunity? _____

22. Does the prospective employee possess the alternate combination of education and experience? _____

23. Does the prospective employee have the experience in an alternate occupation? _____

24. Did the prospective employee gain any of the qualifying experience with the employer in a position substantially comparable to the job opportunity requested? _____

25. Did the employer pay for any of the alien's education or training necessary to satisfy any of the employer's job requirements for the position? _____

26. Is the prospective employee currently employed by the petitioning employer? _____

27. Prospective Employee Work Experience:

Job 1

a. Employer Name: _____

b. Employer Address: _____

c. Type of Business: _____

d. Job Title: _____

e. Start Date: _____

f. End Date: _____

g. Number of Hours worked per week: _____

h. Job Details (duties performed, use of tools, machines, equipment, skills, qualifications, certifications, licenses, etc. Include the phone number of the employer and the name of the alien's supervisor) : _____

Job 2

a. Employer Name: _____

b. Employer Address: _____

c. Type of Business: _____

d. Job Title: _____

e. Start Date: _____

f. End Date: _____

g. Number of Hours worked per week: _____

h. Job Details (duties performed, use of tools, machines, equipment, skills, qualifications, certifications, licenses, etc. Include the phone number of the employer and the name of the alien's supervisor) : _____

Job 3

a. Employer Name: _____

b. Employer Address: _____

c. Type of Business: _____

d. Job Title: _____

e. Start Date: _____

f. End Date: _____

g. Number of Hours worked per week: _____

h. Job Details (duties performed, use of tools, machines, equipment, skills, qualifications, certifications, licenses, etc. Include the phone number of the employer and the name of the alien's supervisor) : _____

Job 4

a. Employer Name: _____

b. Employer Address: _____

c. Type of Business: _____

d. Job Title: _____

e. Start Date: _____

f. End Date: _____

g. Number of Hours worked per week: _____

h. Job Details (duties performed, use of tools, machines, equipment, skills, qualifications, certifications, licenses, etc. Include the phone number of the employer and the name of the alien's supervisor) : _____

Job 5

a. Employer Name: _____

b. Employer Address: _____

c. Type of Business: _____

d. Job Title: _____

e. Start Date: _____

f. End Date: _____

g. Number of Hours worked per week: _____

h. Job Details (duties performed, use of tools, machines, equipment, skills, qualifications, certifications, licenses, etc. Include the phone number of the employer and the name of the alien's supervisor) : _____
