

OMB Approval: 1205-0310
Expiration Date:

Labor Condition Application for Nonimmigrant Workers
Form ETA-9035 & 9035E
U.S. Department of Labor



Please read and review the filing instructions carefully before completing the Form ETA-9035 or 9035E. A copy of the instructions can be found at www.dhs.gov. Applications that do not conform to the regulations at 20 CFR 655.730(b), in complete or obviously inaccurate Labor Condition Applications (LCAs) will not be certified by the Department of Labor (DOL). For all submissions, both electronic (Form ETA-9035E) or paper (Form ETA-9035 where the employer has notified DOL that it will submit this form non-electronically due to a disability or received permission from DOL to file non-electronically due to lack of Internet access), ALL required fields/items containing an asterisk (*)

Form ETA- 9035/9035E

FOR DEPARTMENT OF LABOR USE ONLY

Case Number _____ Case Status _____ Period of Employment _____ to _____

20% \$SSURYDO
([SLUDWLRQ 'DWH

Labor Condition Application for Nonimmigrant Workers
Form ETA-9035 & 9035E
U.S. Department of Labor

Labor Condition Application for Nonimmigrant Workers
Form ETA-9035 & 9035E
U.S. Department of Labor

1

1

4

Departme E Mof Electrical and Computer Engineering /Miami Uni

501 E High Street

Oxford

Ohio

Butler

45056

59670 00

85000 00

4

59670 00

4

4

7/1/2023 - 6/30/2024

20% \$SSURYDO
([SLUDWLRQ 'DWH

Labor Condition Application for Nonimmigrant Workers
Form ETA-9035 & 9035E
U.S. Department of Labor



G. Employer Labor Condition Statements

Important Note : In order for your application to be processed, you MUST read Section G of the Form ETA-9035CP - General Instructions for the 9035 & 9035E under the heading "Employer Labor Condition State.6 (t)-1aStCe ar14.3T -0.011 Tc 0.5.8,_"

FormETA- 9035/9035E

FOR DEPARTMENT OF LABOR USE ONLY

Case Number: _____ Case Status _____ Period of Employment _____ to _____

20% \$SSURYDO

20% \$SSURYDO
([SLUDWLRQ 'DWH

Labor Condition Application for Nonimmigrant Workers
Form ETA-9035 & 9035E
U.S. Department of Labor



K. LCA Preparer

Important Note : Complete this section if the preparer of this LCA is a person other than the one identified in either Section D (employer point of contact) or E (attorney)