### Application for Permanent Employment Certification Form ETA-9089 – Appendix A: Foreign Worker Information U.S. Department of Labor



F	FOREIGN WORKER I	NFORMATI	ON	
A. Foreign Worker Contact Information	n			
1. Foreign Worker's Last (family) Name *	k			
2. Foreign Worker's First (given) Name *				
3. Foreign Worker's Middle Name(s) *				
4. Address 1 (current) *				
5. Address 2 (apartment/suite/floor and number)	§			
6. City *	City * 7. State * 8. Postal Code *		8. Postal Code *	
9. Country *		10. Province §		
11. Date of Birth (mm/dd/yyyy) *	12. Class of Admission *	13. Alien Registration Number (A#) (if applicable)		n Number (A#) (if applicable) *
14. Country of Birth *	<u> </u>			
15. Country of Citizenship or Nationality	*			
B. Foreign Worker Education §				
a. Educational Attainment Information	11			
1. Education: U.S. Diploma/Degree attai	ined relevant to the job oppor	tunity		
☐ None ☐ High School/GED ☐ Associa	ate □ Bachelor's □ Master's	□ Doctorate (P	hD) □	Other Degree (JD, MD, etc.)
1a. If "Other Degree" in question 1, speci	ify the diploma/degree attaine	ed		
1b. Specify major(s) and/or field(s) of stu	dy (may list more than one re	elated major and	I more th	nan one field)
1c. Name of Institution that issued the de	egree/diploma			
1d. Name of Country of institution identifi	ied in guestion 1c		10 M	onth/year attained ( <i>mm/yyyy</i> )
rd. Name of Country of Institution Identifi	led in question to		Te. IVI	onthiyear attained (mmiyyyy)
b. Educational Attainment Information	1 2			
1. Education: U.S. Diploma/Degree attai	ined relevant to the job oppor	tunity		
☐ None ☐ High School/GED ☐ Associa	ite □ Bachelor's □ Master's	☐ Doctorate (P	hD) 🗆	Other Degree (JD, MD, etc.)
1a. If "Other Degree" in question 1, speci			<u> </u>	
1b. Specify major(s) and/or field(s) of stu	dy (may list more than one re	elated major and	I more th	nan one field)
10. Name of Institution that issued the de-	ograa/dinlama			
1c. Name of Institution that issued the de	egree/diploma			

Form ETA-9089 - Appendix A FOR DEPARTMENT OF LABOR USE ONLY Page A.1 of A.5

PERM Case Number: \_\_\_\_\_ Case Status: \_\_\_\_ Determination Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

1e. Month/year attained (mm/yyyy)

1d. Name of Country of Institution identified in question 1c

## `Application for Permanent Employment Certification Form ETA-9089 – APPENDIX A: Foreign Worker Information U.S. Department of Labor



## B. Foreign Worker Education (continued)

c. Educational Attainment Information 3	
Education: U.S. Diploma/Degree attained relevant to the job opportunity	
☐ None ☐ High School/GED ☐ Associate ☐ Bachelor's ☐ Master's ☐ Doctorate (P	hD) ☐ Other Degree (JD, MD, etc.)
1a. If "Other Degree" in question 1, specify the diploma/degree attained	
1b. Specify major(s) and/or field(s) of study (may list more than one related major and	more than one field)
1c. Name of Institution that issued the degree/diploma	
1d. Name of Country of Institution identified in question 1c	1e. Month/year attained ( <i>mm/yyyy</i> )
d. Educational Attainment Information 4	
Education: U.S. Diploma/Degree attained relevant to the job opportunity	
□ None □ High School/GED □ Associate's □ Bachelor's □ Master's □ Doctorate	(PhD) ☐ Other Degree (JD, MD, etc.)
1a. If "Other Degree" in question 1, specify the diploma/degree attained	
1b. Specify major(s) and/or field(s) of study (may list more than one related major and	more than one field)
1c. Name of Institution that issued the degree/diploma	
1d. Name of Country of Institution identified in question 1c	1e. Month/year attained ( <i>mm/yyyy</i> )
e. Educational Attainment Information 5	
Education: U.S. Diploma/Degree attained relevant to the job opportunity	
☐ None ☐ High School/GED ☐ Associate's ☐ Bachelor's ☐ Master's ☐ Doctorate	(PhD) ☐ Other Degree (JD, MD, etc.)
1a. If "Other Degree" in question 1, specify the diploma/degree attained	
1b. Specify major(s) and/or field(s) of study (may list more than one related major and more	e than one field)
1. Name of locity ties that issued the degree/diploma	
1c. Name of Institution that issued the degree/diploma	
1d. Name of Country of Institution identified in question 1c	1e. Month/year attained ( <i>mm/yyyy</i> )
C. Foreign Worker Training Qualifications §	
a. Training, Certification(s), and/or License(s) Information 1	
Name of Institution/School/Training provider	
1a. Name of training, coursework, experience received	

Form ETA-9089 – Appendix A	FOR DEPARTMENT OF LABOR	FOR DEPARTMENT OF LABOR USE ONLY		
PERM Case Number:	Case Status:	Determination Date:	Expiration Date:	

# `Application for Permanent Employment Certification Form ETA-9089 – APPENDIX A: Foreign Worker Information U.S. Department of Labor



1b. Training/Certifications/licenses attained (if applicable)				
10 Stort data of training (mm/4444)	1d. End data of training (mm/y/y/)	10 Month/your awarded (mm/yyyy)		
1c. Start date of training (mm/yyyy)	1d. End date of training ( <i>mm/yyyy</i> )	1e. Month/year awarded ( <i>mm/yyyy</i> )		
b. Training, Certification(s), and/or L	icansa(s) Information 2			
Name of Institution/School/Training	provider			
1a. Name of training, coursework, expe	erience received			
4b Training/Contifications/Licenses at	ained (if applicable)			
1b. Training/Certifications/Licenses att	airied (ii applicable)			
1c. Start date of training (mm/yyyy)	1d. End date of training (mm/yyyy)	1e. Month/year awarded (mm/yyyy)		
c. Training, Certification(s), and/or L	icense(s) Information 3			
Name of Institution/School/Training	provider			
1a. Name of training, coursework, expe	erience received			
1h Training/partifications/liganosa atta	ned (if applicable)			
1b. Training/certifications/licenses atta	ned (II applicable)			
1c. Start date of training (mm/yyyy)	1d. End date of training (mm/yyyy)	1e. Month/year awarded (mm/yyyy)		
D. Foreign Worker Training Qualification	tions §			
01711 41777 18 5	4			
a. Skills, Abilities, and Proficiencies	1			
Name of Employer/Institution/School	ol/Training Provider			
1a. Country	1b. State, Territory	v or Province		
ra. Country	Tb. State, Territory	y, of 1 Tovilloc		
	s, and/or proficiencies the foreign worker pos			
whether the foreign worker meets the re	equirements identified for the job opportunity	(up to 1,500 characters)		

Form ETA-9089 - Appendix A

PERM Case Number: \_\_

FOR DEPARTMENT OF LABOR USE ONLY

Page A.3 of A.5

Case Status: \_\_\_

Determination Date: \_\_\_

### `Application for Permanent Employment Certification Form ETA-9089 – APPENDIX A: Foreign Worker Information U.S. Department of Labor



b. Skills, Abilities, and Proficienci	ies 2			
Name of Employer/Institution/Sci				
1a. Country		1b. Sta	te, Territory, or Prov	ince
1c. Description of specific skills, abili whether the foreign worker meets the	ties, and/or proficiencies the requirements identified fo	e foreign r the job	worker possesses on opportunity (up to 1,	or attained, which help establish 500 characters)
E. Foreign Worker Work Experien	ce §			
Employer Name				
Employer Hame				
1a. Address 1				
1b. Address 2				
1c. City or Town				1d. Postal Code
1e. Country		1f. Stat	e, Territory, or Provi	nce
1g. Job Title				
1h. Start Date (mm/yyyy)	1i. End Date (mm/yyyy)		1j. Present ☐ Yes ☐ No	1k. Hours Worked Per Week

Form ETA-9089 - Appendix A

PERM Case Number: \_\_\_

FOR DEPARTMENT OF LABOR USE ONLY

Page A.4 of A.5

Expiration Date: \_\_\_

Case Status:

Determination Date: \_\_\_\_\_

### `Application for Permanent Employment Certification Form ETA-9089 – APPENDIX A: Foreign Worker Information U.S. Department of Labor



1l. Job Duties: Specify details of the job (work tasks performed, use of tools/equipment, supervision, etc.) (up to 3,500 characters)
For Public Burden Statement, see the Instructions for Form ETA-9089.

PERM Case Number: \_\_\_

Expiration Date: \_\_\_