

CW-1 Application for Temporary Employment Certification
 Form ETA-9142C - Appendix B
 U.S. Department of Labor



1. City *	2. Postal/ZIP Code *	3. Additional Place of Employment Information § (Address—e.g., street address, area, town, village, geographic identification)	4. Additional Work Itinerary Information §							
			Crew ID	Total Workers	Begin Date	End Date	Basic Wage Rate (in \$)		Per	
							From:	To:		

Draft - Not for Submission

For the public burden statement, please see the Form ETA-9142C, General Instructions.