



Department Wage Information Worksheet

Job title: _____ Employee: _____

Part I: General Information

1. Is this a faculty or staff position (circle one)? FACULTY STAFF

STAFF POSITIONS ONLY	If this is a staff position, indicate the pay grade and the minimum and maximum salaries for that grade:
	Pay Grade: _____
	Min Salary: _____
	Max Salary: _____
	If this is a staff position, was the human resource office involved in the hiring process? <input type="checkbox"/> YES <input type="checkbox"/> NO

2. Total number of individuals with the **same title** employed or appointed in the department: _____

3. Please complete either **Item A** or **Item B** below:

Item A: If there are *no so-titled individuals* having similar experience and qualifications (such as education, job responsibility and function, specialized knowledge etc.) for the specific employment in question, please indicate what makes the H-1B1 applicant's position unique (attach a separate sheet if necessary):

Item B: If there *are* such individuals in your department, you must attach a spreadsheet listing all employees in the department who hold the above listed title AND who have the same type of duties and responsibilities as the beneficiary of this petition AND who have qualifications, education and experience similar to the beneficiary of this petition. In the spreadsheet, you must include: (1) each employee's name or a unique identifier; (2) employment start date with your department; and (3) current salary

I have attached a spreadsheet as described in Item B above.

(Continued on the following page)

Part II: Information regarding the wage of the *H-1B* BENEFICIARY

Attach a separate sheet if necessary

1. Please describe the system used by your Department to determine the wage.

2. Were University Guidelines followed in determining the wage? YES NO

3. Were NIH guidelines followed in determining the wage? YES NO N/A

4. Please list previous experience that was taken into consideration when determining the wage.

5. Please list any supervisory and/or independent work factors for the position that were taken into consideration when determining the wage.

Part III: Information regarding the wages of *OTHER SO-TITLED EMPLOYEES*

Attach a separate sheet if necessary

1. Please describe the system used by your Department to determine wages.

2. Were University Guidelines followed in determining wages? YES NO

3. Were NIH guidelines followed in determining wages? YES NO N/A

4. Please list previous experience that was taken into consideration when determining wages.

5. Please list any supervisory and/or independent work factors for the position that were taken into consideration when determining the wage.

I confirm that the information provided above is true and accurate

Print Name & Title of Hiring Authority

Signature of Hiring Authority