

HOW TO CREATE & SUBMIT FORM ETA-9142B IN FLAG.DOL.GOV

June 6, 2019



New Application



My Cases



Profiles



My Network



Choose Application Type

Form ETA-9141C

CW-1 Prevailing Wage

File an application for a Prevailing Wage Determination to be used for a CW-1 Temporary Labor Certification.

Create New

Form ETA-9142C

CW-1 Labor Certification

File a CW-1 application for Temporary Labor Certification with the Chicago National Processing Center.

Create New

Form ETA-9141

H-2B | H-1B | PERM Prevailing Wage

File an application for a Prevailing Wage Determination.

Create New

Form ETA-9142B

H-2B Labor Certification

File an application for a H-2B Temporary Labor Certification.

More forms will be available to file through FLAG soon.



Form ETA-9142B
Application for Temporary Labor Certification

Preliminary Questions

A Nature of H-2B Application

B Temporary Need Information

C Employer Information

D Employer Point of Contact Information

E Attorney or Agent Information (if applicable)

F.a Job Opportunity and Minimum Requirements

F.b.c Place of Employment and

Preliminary Questions

Employers seeking H-2B workers must file a completed Application for Temporary Employment Certification (ETA Form 9142B and the appropriate appendices and valid PWD), a copy of the job order being submitted concurrently to the SWA serving the area of intended employment, and copies of all contracts and agreements with any agent and/or recruiter, executed in connection with the job opportunities.

Employers seeking a waiver of the time period for filing due to an emergency situation must submit a request for a waiver of the time period requirement, a completed Application for Temporary Employment Certification and the proposed job order identifying the SWA serving the area of intended employment, and must otherwise meet the filing requirements above.

Emergency Filing and your Prevailing Wage

F.b.11: Are you requesting a waiver of the period for filing this application (i.e., 90 to 75 days before the expected start date of work) due to an emergency situation under 20 CFR 655.17? *



Yes

No



Form ETA-9142B

Application for Temporary Labor Certification

Preliminary Questions

A Nature of H-2B Application

B Temporary Need Information

C Employer Information

D Employer Point of Contact Information

E Attorney or Agent Information (if applicable)

F.a Job Opportunity and Minimum Requirements

F.b Place of Employment and

Emergency Filing and your Prevailing Wage

F.b.11: Are you requesting a waiver of the period for filing this application (i.e., 90 to 75 days before the expected start date of work) due to an emergency situation under 20 CFR 655.17? *



Yes

No

Form ETA 9141 Case Lookup

F.b.10/F.b.10a/F.b.10b: Locate your Form ETA-9141, Application for Prevailing Wage Determination (PWD) below.*

PWD Case Lookup

If you do not have a relevant Form ETA-9141, Application for Prevailing Wage Determination, please complete one and return to this form once you have submitted.

You must link a Prevailing Wage determination.

Save & Quit

Continue



Form ETA-9142B
Application for Te

Preliminary

A Nature of

B Temporary

C Employer

D Employer Information

E Attorney or (if applicat

F.a Job Opportunity and minimum Requirements

Place of Employment and

Employers seeking a waiver of the time period for filing due to an emergency situation must submit a request for a waiver of the time period requirement, a completed Application for Temporary Employment Certification and the proposed job order identifying the SWA serving



Form ETA 9141 Case Lookup

Locate your Form ETA-9141, Application for Prevailing Wage Determination (PWD) obtained for the job opportunity. (Use the search below to refine by Case Number, Employer Name, FEIN, Job Title or Determined SOC.)

Click to search a Prevailing Wage submitted in iCERT

[Find a PW submitted in iCert](#)

	Case Number	Employer Name	FEIN	Job Title	Determined SOC	Determination Date▼
<input type="radio"/>	P-400-19155-059...	Legal Business N...	123456789	Butchers and Mea...	51-3021.00	2019-06-04T20:35...

Click to select determined case

Next





Form ETA-9142B
Application for Temporary Employment Certification

Preliminary

A Nature of Employment

B Temporary Employment

C Employer Information

D Employer Information

E Attorney or Agent Information (if applicable)

F.a Job Opportunity and Minimum Requirements

F.b Place of Employment and

Employers seeking a waiver of the time period for filing due to an emergency situation must submit a request for a waiver of the time period requirement, a completed Application for Temporary Employment Certification and the proposed job order identifying the SWA serving



Here's your Requestor POC information from your Prevailing Wage determination:

REQUESTOR POINT OF CONTACT INFORMATION

Contact's Last (family) Name	Last
First (given) Name	First
Middle Name(s)	Middle
Contact's Job Title	Account testing

Select how this should populate in your Temporary Labor Certification Application:

Employer Point of Contact

9142B Section D

Attorney/Agent Agreement

9142B Section E

Back

Next

Additional PWD(s)



Form ETA-9142B
Application for Temporary Labor Certification

- ✓ Preliminary Questions
- A Nature of H-2B Application**
- ⚠ Temporary Need Information
- ✓ Employer Information
- ✓ Employer Point of Contact Information
- E Attorney or Agent Information (if applicable)
- ⚠ Job Opportunity and Minimum Requirements
- ⚠ Place of Employment and

Nature of H-2B Application



IMPORTANT: Employers and authorized preparers must read these instructions carefully before completing the Form ETA-9142B, H-2B Application for Temporary Employment Certification and Appendices A to D. These instructions contain full explanations of the questions and attestations that make up the Form ETA-9142B and Appendices A to D. *In accordance with Federal Regulations, incomplete or obviously inaccurate applications will not be certified by the Department of Labor. Those items marked with an asterisk (*) are required and must be completed. Items marked with a section symbol (§) are conditional and must be completed if applicable.*

[Read more](#)

Cap-Exempt Workers

A.1: Is the employer seeking to employ any H-2B workers under this application who will be exempt from the statutory numerical limit, or "cap," on the total number of foreign nationals who may be issued an H-2B visa or otherwise granted H-2B status? * ?

- Yes
- No



Form ETA-9142B
Application for Temporary Labor Certification

- ✓ Preliminary Questions
- ✓ Nature of H-2B Application
- B Temporary Need Information**
- ✓ Employer Information
- ✓ Employer Point of Contact Information
- E Attorney or Agent Information (if applicable)
- ⚠ Job Opportunity and Minimum Requirements
- ⚠ Place of Employment and

Temporary Need Information



B.1: Job Title *

B.2/B.3: SOC Code and Occupation Title *

B.4: Number of Workers *

This field is required

B.5: Begin Date *

 X

This field is required

A completed Application for Temporary Employment Certification must be filed no more than 90 calendar days and no less than 75 calendar



Form ETA-9142B

Application for Temporary Labor Certification

- Preliminary Questions
- Nature of H-2B Application
- B Temporary Need Information**
- Employer Information
- Employer Point of Contact Information
- Attorney or Agent Information (if applicable)
- Job Opportunity and Minimum Requirements
- Place of Employment and

B.6: End Date *

 X

B.7: Nature of Temporary Need *

- Seasonal
- Peakload
- One-Time Occurrence
- Intermittent

This field is required

B.8: Statement of Temporary Need *

This field is required

0 / 4000 character limit

Document Upload - Temporary Need

B.8: The brief statement of temporary need must be provided in the space above, however, you may include one separate attachment where the allotted space is insufficient.





Form ETA-9142B

Application for Temporary Labor Certification

- Preliminary Questions
- Nature of H-2B Application
- B Temporary Need Information**
- Employer Information
- Employer Point of Contact Information
- E Attorney or Agent Information (if applicable)
- ⚠ Job Opportunity and Minimum Requirements
- ⚠ Place of Employment and

B.8. Statement of Temporary Need


This field is required

0 / 4000 character limit



Document Upload - Temporary Need

B.8: The brief statement of temporary need must be provided in the space above, however, you may include one separate attachment where the allotted space is insufficient. [?](#)

 Drop files here or [Browse](#)

Save & Quit

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Continue



Form ETA-9142B

Application for Temporary Labor Certification

✓ Preliminary Questions

✓ Nature of H-2B Application

✓ Temporary Need Information

C **Employer Information**

✓ Employer Point of Contact Information

E Attorney or Agent Information (if applicable)

⚠ Job Opportunity and Minimum Requirements

⚠ Place of Employment and

Employer Information

This information has been pre-populated from the 9141 case you selected in the Preliminary Questions section

Employer Name(s)

C.1: Legal Business Name * ?

C.2: Trade name/Doing Business As (DBA), if applicable ?

Employer Address

C.3: Address 1 * ?

C.4: Address 2 ((apartment/suite/floor and number) ?

C.5: City * ?



Form ETA-9142B

Application for Temporary Labor Certification

- ✓ Preliminary Questions
- ✓ Nature of H-2B Application
- ✓ Temporary Need Information
- ✓ Employer Information
- D Employer Point of Contact Information**
- E Attorney or Agent Information (if applicable)
- ⚠ Job Opportunity and Minimum Requirements
- ⚠ Place of Employment and

Employer Point of Contact Information

This information has been pre-populated from the 9141 case you selected in the Preliminary Questions section



The information contained in this section must be that of an employee of the employer who is authorized to act on behalf of the employer in labor certification matters. The information in this Section must be different from the agent or attorney information listed in Section E, unless the attorney is an employee of the employer.

Employer Point of Contact Name & Title

D.1: Contact's Last (family) Name * ?

D.2: First (given) Name * ?

D.3: Middle Name(s) ?

D.4: Contact's Job Title * ?



- ✓ Preliminary Questions
- ✓ Nature of H-2B Application
- ✓ Temporary Need Information
- ✓ Employer Information
- ✓ Employer Point of Contact Information
- E Attorney or Agent Information (if applicable)**
- ⚠ Job Opportunity and Minimum Requirements
- ⚠ Place of Employment and

Attorney or Agent Information (if applicable)



Type of Representation

E.1: Indicate the type of representation for the employer in the filing of this application. * ?

- Attorney
- Agent
- None

If Attorney or Agent is selected additional fields will be required below

Attorney / Agent Name

E.2: Attorney or Agent's Last (family) Name * ?

E.3: First (given) Name * ?

E.4: Middle Name(s) ?



Form ETA-9142B
Application for Temporary Labor Certification

- ✓ Preliminary Questions
- ✓ Nature of H-2B Application
- ✓ Temporary Need Information
- ✓ Employer Information
- ✓ Employer Point of Contact Information
- ✓ Attorney or Agent Information (if applicable)
- F.a Job Opportunity and Minimum Requirements**


Place of Employment and

Job Opportunity and Minimum Requirements

Document Upload - SWA Job Order

F.a.1: You must upload the job order submitted concurrently to the State Workforce Agency (SWA) serving the area of intended employment.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. * ?

 Drop files here or [Browse](#)

0_Doc2.docx [Clear](#)

F.a.2: Name of the State * ?

VIRGINIA

F.a.3: Date Job Order Submitted *



05/22/2019 X



Form ETA-9142B

Application for Temporary Labor Certification

- ✓ Preliminary Questions
- ✓ Nature of H-2B Application
- ✓ Temporary Need Information
- ✓ Employer Information
- ✓ Employer Point of Contact Information
- ✓ Attorney or Agent Information (if applicable)
- F.a Job Opportunity and Minimum Requirements**

Place of Employment and

Anticipated days and hours of work per week ?

F.a.5 A-H: (an entry is required for each box below) *

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Total: **0** hours

The entry in this field must be at least 35 hours per week

Hourly work schedule ?

(an entry is required for each box below) *

F.a.6a: Begin Time *

F.a.6b: End Time *

Education & Training





Form ETA-9142B

Application for Temporary Labor Certification

- Preliminary Questions
- Nature of H-2B Application
- Temporary Need Information
- Employer Information
- Employer Point of Contact Information
- Attorney or Agent Information (if applicable)
- F.a Job Opportunity and Minimum Requirements**

F.a

Job Opportunity and Minimum Requirements

6

F.a.9: Work Experience: number of months required * [?](#)

3

F.a.10: Supervision: does this position supervise the work of other employees? * [?](#)

Yes

No

F.a.11: Special Requirements - List specific skills, licenses/certifications, field(s) of training, and requirements of the job. * [?](#)

specific requirements

21 / 4000 character limit

Save & Quit

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Continue

Place of Employment and



Form ETA-9142B

Application for Temporary Labor Certification

- ✓ Preliminary Questions
- ✓ Nature of H-2B Application
- ✓ Temporary Need Information
- ✓ Employer Information
- ✓ Employer Point of Contact Information
- ✓ Attorney or Agent Information (if applicable)
- ✓ Job Opportunity and Minimum Requirements
- Place of Employment and

Place of Employment and Wage Information

Place of Employment

F.b.1: Worksite Address * ?

F.b.2: Worksite Address (*apartment/suite/floor and number*) ?

F.b.3: City * ?

F.b.4: State * ?

F.b.5: Postal Code * ?

F.b.6: County * ?



Form ETA-9142B

Application for Temporary Labor Certification

- Preliminary Questions
- Nature of H-2B Application
- Temporary Need Information
- Employer Information
- Employer Point of Contact Information
- Attorney or Agent Information (if applicable)
- Job Opportunity and Minimum Requirements
- Place of Employment and**

Your 9141 Prevailing Wage

Your 9141 Prevailing Wage rate

F.b.8: Basic Wage Rate Paid * ?

From To

F.b.8a: Overtime Wage Rate Paid ?

From To

F.b.9: Per (Choose only one) * ?

- Hour
- Week
- Bi-weekly
- Month
- Year
- Piece Rate
- N/A

F.b.9a: Additional conditions about the wage rate to be paid. ?






Form ETA-9142B

Application for Temporary Labor Certification


- ✓ Preliminary Questions
- ✓ Nature of H-2B Application
- ✓ Temporary Need Information
- ✓ Employer Information
- ✓ Employer Point of Contact Information
- ✓ Attorney or Agent Information (if applicable)
- ✓ Job Opportunity and Minimum Requirements

F.b-c Place of Employment and Wage Information

Prevailing Wage Determination Information

F.b.10: 1st PWD Number Case Number * 

P-400-19155-059597

F.b.10a: 2nd PWD Number Case Number 

F.b.10b: 3rd PWD Number Case Number 

Additional Worksites

F.c.1: Will work be performed at worksite locations other than the one identified above? * 

- Yes
- No

Save & Quit

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Continue



F.d Other Material Terms and Conditions of the Job Offer

F.e Recruitment Information

G/H Other Supporting Documentation

I Preparer

Appendix A - Multiple Worksites

APX C Appendix C - Foreign Labor Recruiter Information

APX D Appendix D - Employer-Client Information

Application Documents

Review & Submit

Other Material Terms and Conditions of the Job Offer



Daily Transportation

F.d.1: Workers will be provided with daily transportation to and from the worksite in compliance with all applicable Federal and Commonwealth laws and regulations. * ?

- Yes
- N/A

Overtime Available

F.d.2: Overtime hours will be available to the worker under this job offer and payable for every hour worked at the rate disclosed in this application. * ?

- Yes
- N/A

This field is required

On-the-Job Training Available

- ✓ Preliminary Questions
- ✓ Nature of H-2B Application
- ✓ Temporary Need Information
- ✓ Employer Information
- ✓ Employer Point of Contact Information
- ✓ Attorney or Agent Information (if applicable)
- ✓ Job Opportunity and Minimum Requirements
- ⚠ Place of Employment and Wage Information
- F.d Other Material Terms and Conditions of the Job Offer**
- ✓ Recruitment Information

On-the-Job Training Available

F.d.3: Workers will be provided with on-the-job training to perform the duties assigned. * ?

- Yes
- N/A

Employer-Provided Tools and Equipment

F.d.4: Workers will be provided, without charge or deposit charge, all tools, supplies, and equipment required to perform the duties assigned. * ?

- Yes
- N/A

Board, Lodging, or Other Facilities

F.d.5: Workers will be provided with board, lodging, or other facilities and/or the employer will assist workers in securing board, lodging, or other facilities. * ?

- Yes
- N/A

Deduction Fr



✓ Preliminary Questions

✓ Nature of H-2B Application

✓ Temporary Need Information

✓ Employer Information

✓ Employer Point of Contact Information

✓ Attorney or Agent Information (if applicable)

✓ Job Opportunity and Minimum Requirements

⚠ Place of Employment and Wage Information

F.d Other Material Terms and Conditions of the Job Offer

✓ Recruitment Information

equipment required to perform the duties assigned. * ?

Yes

N/A

Board, Lodging, or Other Facilities

F.d.5: Workers will be provided with board, lodging, or other facilities and/or the employer will assist workers in securing board, lodging, or other facilities. * ?

Yes

N/A

Deduction From Pay

F.d.6: State all deduction(s) from pay and, if known, the amount(s). * ?

None.

Save & Quit

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File Explorer





✓ Other Material Terms and Conditions of the Job Offer

F.e Recruitment Information

G/H Other Supporting Documentation

I Preparer

✓ Appendix A - Multiple Worksites

APX C Appendix C - Foreign Labor Recruiter Information

APX D Appendix D - Employer-Client Information

✓ Application Documents

📄 Review & Submit

Recruitment Information

Two of three entries required *

F.e.1: Telephone Number to Apply ?



F.e.2: Email Address to Apply ?

F.e.3: Website Address (URL) to Apply ?

Save & Quit

Back

Continue

✓ Other Material Terms and Conditions of the Job Offer

✓ Recruitment Information

G/H Other Supporting Documentation

I Preparer

✓ Appendix A - Multiple Worksites

APX C Appendix C - Foreign Labor Recruiter Information

APX D Appendix D - Employer-Client Information

✓ Application Documents

📄 Review & Submit

Other Supporting Documentation



Type of Employer

G.1: Choose only one * ?

Individual Employer

Job Contractor - Joint Employer

Based on your selection in G.1, certain application fields may not appear.

When Job Contractor - Joint Employer is selected, the Appendix D section will be required to complete

G.2: Is the employer covered by the requirements of the Migrant and Seasonal Agricultural Workers Protection Act (MSPA) to obtain a Certificate of Registration? * ?

Yes

No

N/A

Foreign Labor Recruiter Information

G.5: Is the employer, and its attorney or agent, as applicable, engaging or planning to engage any agent(s) or recruiter(s) in the recruitment of prospective H-2B workers, regardless of whether such agent(s) or recruiter(s) is (are) located in the U.S. or abroad? * ?

Yes

No

E Attorney or Agent Information (if applicable)

F.a Job Opportunity and Minimum Requirements

F.b-c Place of Employment and Wage Information

F.d Other Material Terms and Conditions of the Job Offer

F.e Recruitment Information

G/H Other Supporting Documentation

I Preparer

APX A Appendix A - Multiple Worksites

APX C Appendix C - Foreign Labor Recruiter Information

APX D Appendix D - Employer-Client Information

✓ Application Documents

📄 Review & Submit




G.2: Is the employer covered by the requirements of the Migrant and Seasonal Agricultural Workers Protection Act (MSPA) to obtain a Certificate of Registration? * [?](#)

- Yes
- No
- N/A

Document Upload - Employer MSPA

You can upload a copy of the employer's current MSPA Certificate of Registration identifying the farm labor contracting activities the employer is authorized to perform attached to this application.


Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. * [?](#)

 Drop files here or [Browse](#)

Document Upload - Job Contractor Agreement/Contract

G.4: Because this application relates to Job Contractor - Joint Employer, confirm that the employer-client identified has read and agrees to all the applicable terms, assurances, and obligations contained in Appendix B and has attach a separate signed and dated copy of [Appendix B](#) with this application.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. * [?](#)

 Drop files here or [Browse](#)



- E Attorney or Agent Information (if applicable)
- F.a Job Opportunity and Minimum Requirements
- F.b-c Place of Employment and Wage Information
- F.d Other Material Terms and Conditions of the Job Offer
- F.e Recruitment Information
- G/H Other Supporting Documentation**
- I Preparer
- APX A Appendix A - Multiple Worksites
- APX C Appendix C - Foreign Labor Recruiter Information
- APX D Appendix D - Employer-Client Information
- ✓ Application Documents
- 📄 Review & Submit

Foreign Labor Recruiter Information

G.5: Is the employer, and its attorney or agent, as applicable, engaging or planning to engage any agent(s) or recruiter(s) in the recruitment of prospective H-2B workers, regardless of whether such agent(s) or recruiter(s) is (are) located in the U.S. or abroad? *

- Yes
- No

The entry of Foreign Labor Recruiters will be completed in the Appendix C section

Document Upload - Recruiter Agreement

G.6: You must upload a copy of all agreements with any agent or recruiter whom you are engaging or planning to engage in the recruitment of H-2B Workers.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. *

Drop files here or [Browse](#)

Declaration of Employer and Attorney/Agent

In accordance with Federal regulations, the employer(s) must attest to abide by certain terms, assurances, and obligations as a condition for receiving a temporary labor certification from the U.S. Department of Labor. Applications that fail to attach Appendix B will not be certified by the Department.



- E Attorney or Agent Information (if applicable)
- F.a Job Opportunity and Minimum Requirements
- F.b-c Place of Employment and Wage Information
- F.d Other Material Terms and Conditions of the Job Offer
- F.e Recruitment Information
- G/H Other Supporting Documentation**
- I Preparer
- APX A Appendix A - Multiple Worksites
- APX C Appendix C - Foreign Labor Recruiter Information
- APX D Appendix D - Employer-Client Information
- ✓ Application Documents**
- 📄 Review & Submit

In accordance with Federal regulations, the employer(s) must attest to abide by certain terms, assurances, and obligations as a condition for receiving a temporary labor certification from the U.S. Department of Labor. Applications that fail to attach Appendix B will not be certified by the Department.

Document Upload - Appendix B

H.1: Confirm that you have read and agree to all the applicable terms, assurances and obligations contained in Appendix B and attach a signed and dated copy of [Appendix B](#).

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. * ?

Drop files here or [Browse](#)

Document Upload - Employer-client Appendix B

H.2: Because this application relates to Job Contractor - Joint Employer, confirm that the employer-client identified has read and agrees to all the applicable terms, assurances, and obligations contained in Appendix B and has attach a separate signed and dated copy of [Appendix B](#) with this application.

Only .pdf, .doc, .docx, .txt, .xls, .xlsx files under 30 MB can be uploaded. * ?

Drop files here or [Browse](#)

Save & Quit

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✓ Other Material Terms and Conditions of the Job Offer

✓ Recruitment Information

✓ Other Supporting Documentation

I **Preparer**

✓ Appendix A - Multiple Worksites

✓ Appendix C - Foreign Labor Recruiter Information

✓ Appendix D - Employer-Client Information

✓ Application Documents

📄 Review & Submit

Preparer

Complete this section if the preparer of this application is a person other than the one identified in either Section D (employer point of contact) or section E (attorney or agent) of this application.

I.1: Last (family) name [?](#)

I.2: First (given) name [?](#)

I.3: Middle Initial [?](#)

I.4: Law Firm/Business FEIN [?](#)

I.5: Law Firm/Business Name [?](#)



Appendix A - Multiple Worksites

The need to complete Appendix A determined by responses in prior application sections

Section Complete

Because you indicated that work is only being performed at one worksite (per Field F.c.1), no Appendix A is necessary for this application.

Save & Quit

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Have a question?

Please Note:

Applicants will upload Appendix B in Section G/H above

Other Material Terms and Conditions of the Job Offer

Recruitment Information

Other Supporting Documentation

Preparer

APX A Appendix A - Multiple Worksites

Appendix C - Foreign Labor Recruiter Information

Appendix D - Employer-Client Information

Application Documents

Review & Submit

- ✓ Other Material Terms and Conditions of the Job Offer
- ✓ Recruitment Information
- ✓ Other Supporting Documentation
- I Preparer
- ✓ Appendix A - Multiple Worksites
- APX C** **Appendix C - Foreign Labor Recruiter Information**
- ✓ Appendix D - Employer-Client Information
- ✓ Application Documents
- 📄 Review & Submit

Appendix C - Foreign Labor Recruiter Information

The need to complete Appendix C is determined by responses in prior application sections

When G.5 is Yes, Append C will require Foreign Labor Recruitment Information to be entered

✓ Section complete

Because you indicated that you are not engaging or planning to engage any agent(s) or recruiter(s) in the recruitment of prospective H2-B workers (per Field G.5), no Appendix C is necessary for this application.

Save & Quit

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Please Note:

Applicants will upload Appendix B in Section G/H above

✓ Other Material Terms and Conditions of the Job Offer

✓ Recruitment Information

✓ Other Supporting Documentation

I Preparer

✓ Appendix A - Multiple Worksites

✓ Appendix C - Foreign Labor Recruiter Information

APX D **Appendix D - Employer-Client Information**

✓ Application Documents

📄 Review & Submit

Appendix D - Employer-Client Information

✓ Section complete

Because you indicated that you are filing as an *Individual Employer* (per Field G.1), no Appendix D is necessary for this application.

The need to complete Appendix D is determined by responses in prior application sections

When filing as a Job Contractor – Joint Employer, Appendix D will collect specific Employer-Client Information



Save & Quit

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Application Documents

Below, you will find a summary of documents that you have uploaded to this application throughout the form. You may also add and categorize additional supplemental documents below.

Add Document

3 Additional Documents

i You can modify documents which were added in previous application sections by returning to those sections.

Document Name	Category	Actions
0_Doc2.docx	SWA Job Order	...
0_Doc2.docx	Employer MSPA	...
0_Doc2.docx	Appendix B	...

✓ Other Material Terms and Conditions of the Job Offer

✓ Recruitment Information

✓ Other Supporting Documentation

| Preparer

✓ Appendix A - Multiple Worksites

✓ Appendix C - Foreign Labor Recruiter Information

✓ Appendix D - Employer-Client Information

Application Documents

📄 Review & Submit



✓ Other Material Terms and Conditions of the Job Offer

✓ Recruitment Information

✓ Other Supporting Documentation

| Preparer

✓ Appendix A - Multiple Worksites

✓ Appendix C - Foreign Labor Recruiter Information

✓ Appendix D - Employer-Client Information


✓ Application Documents

Review & Submit

Review & Submit

OMB Approval: 1205-0509
Expiration Date: XXXX/XXXX

H-2B Application for Temporary Employment Certification
Form ETA-9142B
U.S. Department of Labor



IMPORTANT: Employers and authorized preparers must read the general instructions carefully before completing the Form ETA-9142B. A copy of the instructions can be found at <http://www.foreignlaborcert.dhs.gov>. If you are not submitting this electronically, please complete ALL required fields/items containing an asterisk (*) and any fields/items where a response is conditional as indicated by the section (§) symbol.

A. Nature of H-2B Application

1. Is the employer seeking to employ any H-2B workers under this application who will be exempt from the statutory numerical limit, or "cap," on the total number of foreign nationals who may be issued an H-2B visa or otherwise granted H-2B status? * Yes No

B. Temporary Need Information

1. Job Title * JOB TITLE		
2. SOC Code * 51-3021.00	3. SOC Occupation Title * Slaughterers and Meat Packers	
4. Number of Workers * 3	5. Begin Date * 07/04/2019 <small>(mm/dd/yyyy)</small>	6. End Date * 01/09/2020 <small>(mm/dd/yyyy)</small>
7. Nature of Temporary Need (Choose only one) * <input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Peakload <input type="checkbox"/> One-Time Occurrence <input type="checkbox"/> Intermittent		
8. Statement of Temporary Need * (Must be disclosed on this form. One separate attachment will be accepted to fully complete the response.) Statement of Temporary Need Test		

Desktop