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



FOREIGN WORKER INFORMATION

A.	Foreign Worker Contact Information					
1.	Foreign Worker's Last (family) Name *					
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 *		7. State *	8. Postal Code *		
9.	Country *		10. Province	\$		
11	. Date of Birth (mm/dd/yyyy) *	12. Class of Admission *	13. Alien Re	gistration Number (A#) (if applicable) *		
14	Country of Birth *					
15	5. Country of Citizenship or Nationality *	•				
В.	Foreign Worker Education §					
	Educational Attainment Information	4				
a.	Education: U.S. Diploma/Degree attail		unity			
	None ☐ High School/GED ☐ Associa	•	-	PhD) □ Other Degree (ID, MD, etc.)		
	i. If "Other Degree" in question 1, speci			TID) II Other Degree (0D, MD, etc.)		
1k	o. Specify major(s) and/or field(s) of students	dy (may list more than one re	lated major and	I more than one field)		
10	. Name of Institution that issued the de	gree/diploma				
10	I. Name of Country of institution identific	ed in question 1c		1e. Month/year attained (mm/yyyy)		
b.	Educational Attainment Information					
	Education: U.S. Diploma/Degree attain	•	-			
	None ☐ High School/GED ☐ Associa			PhD) ☐ Other Degree (JD, MD, etc.)		
18	If "Other Degree" in question 1, speci-	ty the diploma/degree attaine	1			
1t	o. Specify major(s) and/or field(s) of students	dy (may list more than one re	ated major and	I more than one field)		
10	. Name of Institution that issued the de	gree/diploma				
10	l. Name of Country of Institution identifi	ed in question 1c		1e. Month/year attained (mm/yyyy)		
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B. Foreign Worker Education (continued)

c.	Educational Attainment Information 3				
1.	Education: U.S. Diploma/Degree attained relevant to the job opportunity				
	None ☐ High School/GED ☐ Associate ☐ Bachelor's ☐ Master's ☐ Doctorate (PhD) ☐ Other Degree (JD, MD, etc.)				
1a	1a. If "Other Degree" in question 1, specify the diploma/degree attained				
1k	b. Specify major(s) and/or field(s) of study (may list more than one related major and more than one field)				
10	c. Name of Institution that issued the degree/diploma				
10	d. Name of Country of Institution identified in question 1c	1e. Month/year attained (<i>mm/yyyy</i>)			
d.	Educational Attainment Information 4				
1.	Education: U.S. Diploma/Degree attained relevant to the job opportunity				
	None $\ \square$ High School/GED $\ \square$ Associate's $\ \square$ Bachelor's $\ \square$ Master's $\ \square$ Doctorate	(PhD) ☐ Other Degree (JD, MD, etc.)			
1a	1a. If "Other Degree" in question 1, specify the diploma/degree attained				
1b	1b. Specify major(s) and/or field(s) of study (may list more than one related major and more than one field)				
10	1c. Name of Institution that issued the degree/diploma				
10	d. Name of Country of Institution identified in question 1c	1e. Month/year attained (<i>mm/yyyy</i>)			
e.	Educational Attainment Information 5				
1.	Education: U.S. Diploma/Degree attained relevant to the job opportunity				
	\square None \square High School/GED \square Associate's \square Bachelor's \square Master's \square Doctorate (PhD) \square Other Degree (JD, MD, etc.)				
1a	1a. If "Other Degree" in question 1, specify the diploma/degree attained				
1k	1b. Specify major(s) and/or field(s) of study (may list more than one related major and more than one field)				
10	1c. Name of Institution that issued the degree/diploma				
10	d. 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				
1.	Name of Institution/School/Training provider				
1a	a. Name of training, coursework, experience received				

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1b. Training/Certifications/licenses atta	nined (if applicable)	
1c. Start date of training (mm/yyyy)	1d. End date of training (mm/yyyy)	1e. Month/year awarded (mm/yyyy)
o. Training, Certification(s), and/or L	icense(s) Information 2	
Name of Institution/School/Training	provider	
1a. Name of training, coursework, expo	erience received	
1b. Training/Certifications/Licenses att	ained (if applicable)	
1c. Start date of training (mm/yyyy)	1d. End date of training (mm/yyyy)	1e. Month/year awarded (<i>mm/yyyy</i>)
. Training, Certification(s), and/or L	• •	
Name of Institution/School/Training	provider	
1a. Name of training, coursework, expe	erience received	
1b. Training/certifications/licenses atta	ined (if applicable)	
1c. Start date of training (mm/yyyy)	1d. End date of training (mm/yyyy)	1e. Month/year awarded (<i>mm/yyyy</i>)
D. Foreign Worker Skills, Abilities and	d Proficiencies §	
. Skills, Abilities, and Proficiencies		
Name of Employer/Institution/School	ol/Training Provider	
1a. Country	1b. State, Territor	ry, or Province
	s, and/or proficiencies the foreign worker po equirements identified for the job opportunit	

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Obilla Abilidia and Busti	-innaina 0			
Skills, Abilities, and Profice 1. Name of Employer/Institution				
1. Name of Employer/institution	on/ocnool/ Halling Frovide			
1a. Country		1b. Sta	te, Territory, or Provi	nce
Lc Description of specific skills	s, abilities, and/or proficiencies th	e foreign	worker possesses o	r attained which help establish
	eets the requirements identified fo			
Foreign Worker Work Exp	perience §			
Work Experience 1				
. Employer Name				
a. Address 1				
b. Address 2				
c. City or Town				1d. Postal Code
		1f. Stat	e, Territory, or Provir	
e. Country		1f. Stat	e, Territory, or Provir	
le. Country		1f. Stat	e, Territory, or Provir	
1c. City or Town 1e. Country 1g. Job Title 1h. Start Date (mm/yyyy)	1i. End Date (mm/yyyy)	1f. Stat	e, Territory, or Provir	

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11. Job Duties: Specify details of the job (work tasks performed, use of tools/equipment, supervision, etc.) (up to 3,500					
characters)					
or Bublic Burden Statement, see the Instructions for Form ETA 0000					
For Public Burden Statement, see the Instructions for Form ETA-9089.					

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