U.S. Department of Labor

Employment and Training Administration Office of Foreign Labor Certification

Public Disclosure File: CW-1, Form ETA-9142C, Appendix A

Federal Fiscal Year: 2020

Reporting Period: October 1, 2019 through September 30, 2020

<u>Important Note</u>: This public disclosure file contains administrative data from employers' CW-1 Applications, as provided by the employer or representative, for Temporary Employment Certification (Form-9142C Appendix A) and the final determinations issued by the Department's Office of Foreign Labor Certification, Employment and Training Administration, where the date of the determination was issued during the reporting period above.

The following form item is not included in the public disclosure file it contains Personally Identifiable Information (PII): Employer's Federal Employer Identification Number (FEIN).

FIELD	DESCRIPTION
CASE_NUMBER	Unique identifier assigned to each application submitted for processing to OFLC.
EMPLOYER-CLIENT_LEGAL_ BUSINESS_NAME	Employer-Client Legal Business Name. Form ETA-9142C Appendix A, Section A, Item 1.
EMPLOYER-CLIENT_TRADE_NAME_ DBA	Employer-Client Legal Business Name. Form ETA-9142C Appendix A, Section A, Item 2.
EMPLOYER-CLIENT_ADDRESS1	
EMPLOYER-CLIENT_ADDRESS2	Contact information of Employer-Client requesting temporary labor certification. Form ETA-9142C, Appendix A Section A, Item 3 through Item 11.
EMPLOYER-CLIENT_CITY	
EMPLOYER-CLIENT_STATE	
EMPLOYER-CLIENT_POSTAL_CODE	
EMPLOYER-CLIENT_COUNTRY	
EMPLOYER-CLIENT_PROVINCE	
EMPLOYER-CLIENT_PHONE	
EMPLOYER-CLIENT_PHONE_EXT	
EMPLOYER-CLIENT_NAICS_CODE	Industry code associated with the employer requesting temporary labor certification, as classified by the North American Industrial Classification System (NAICS). Form ETA-9142C, Appendix A, Section A Item 13.
EMPLOYER-CLIENT_POC_LAST_ NAME	Point of Contact (POC) name of the Employer-Client. Form ETA-9142C, Appendix A, Section B, Item 1 through Item 4.

FIELD	DESCRIPTION
EMPLOYER-CLIENT_POC_FIRST_ NAME	
EMPLOYER-CLIENT_POC_MIDDLE_ NAME	
EMPLOYER-CLIENT_POC_JOB_TITLE	
EMPLOYER-CLIENT_POC _ADDRESS1	
EMPLOYER-CLIENT_POC _ADDRESS2	Employer-Client POC information. Form ETA-9142C, Appendix A, Section B, Item 5 through 14.
EMPLOYER-CLIENT_POC_CITY	
EMPLOYER-CLIENT_POC_STATE	
EMPLOYER-CLIENT_POC_POSTAL_ CODE	
EMPLOYER-CLIENT_POC_COUNTRY	
EMPLOYER-CLIENT_POC_PROVINCE	
EMPLOYER-CLIENT_POC_PHONE	
EMPLOYER-CLIENT_POC_PHONE_ EXT	
EMPLOYER- CLIENT_POC_BUSINESS_EMAIL	