

Please post 2 copies of the draft LCA (Labor Conditions Application) in 2 separate conspicuous locations for 10 business days for each site of activity. This form is used to detail where and when the draft LCA was posted.

#### BENEFICIARY INFORMATION

LCA Number:

Number of positions sought & position title:

LCA/Appointment start date:

LCA/Appointment end date:

#### POSTING DETAILS

**2 copies** of this Labor Condition Application (LCA) were posted for 10 days:

From: (mm/dd/yyyy)

Until: (mm/dd/yyyy)

At the following worksite address:

In the following 2 locations at the worksite address:

1.

2.

#### DEPARTMENT VERIFICATION

Department Contact

Date

(sign here)

#### LABOR CONDITION APPLICATION (LCA) POSTING INFORMATION

The Labor Condition Application has been posted in accordance with 20 C.F.R 655.734(a)(ii)(B). The Labor Condition Application is available for public inspection at the Office of International Student and Scholar Services, 1902 Sheridan Rd. Evanston, Illinois 60208.

Complaints alleging misrepresentation of material facts in the labor condition application and/or failure to comply with the terms of the labor condition application may be filed with any office of the Wage and Hour Division of the United States Department of Labor.

**U.S. Department of Labor Fact Sheet #62M: What are an H-1B employer's notification requirements?**

<https://www.dol.gov/agencies/whd/fact-sheets/62m-h1b-notice>