

# NOTICE OF JOB AVAILABILITY

*This notice is posted in connection with the filing of an application for permanent alien labor certification. An application concerning the employment of one foreign national worker for the permanent position that is identified below will be filed with the Department of Labor. This Notice of Filing will be posted for 10 consecutive business days in a conspicuous location in the workplace and in the in-house media in accordance with the normal procedures used for recruitment, ending between 30 and 180 days before filing the permanent labor certification application. This notice is provided in compliance with 20 CFR 656.10(d). Any person may provide documentary evidence bearing on the application to the Certifying Officer of the Department of Labor at the following address:*

**Certifying Officer  
U.S. Department of Labor  
Employment & Training Administration  
Atlanta Processing Center, Harris Tower  
233 Peachtree Street, Suite 410  
Atlanta, GA 30303**

---

POSITION TITLE: \_\_\_\_\_

DEPARTMENT/CENTER LOCATION: \_\_\_\_\_

DUTIES: \_\_\_\_\_

REQUIREMENTS: \_\_\_\_\_

SALARY: \_\_\_\_\_ LOCATION OF EMPLOYMENT \_\_\_\_\_

DEPARTMENT/CENTER CONTACT INFORMATION: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

EMPLOYMENT AND TRAINING ADMINISTRATION'S  
NOTICE OF JOB AVAILABILITY ATTESTATION

If applicable, the bargaining representative for workers in the occupation in which the *alien* will be employed has been provided with a copy of the ETA's Job Availability Notice for the applicable position (attached to this attestation). If there is no bargaining representative, a notice of this filing has been posted for 10 business days in a conspicuous location at the place of employment.

A copy of the email notice to the United Faculty of Florida (UFF-UF) representatives is attached to this Notice of Job Availability  
To: [president@uff-uf.org](mailto:president@uff-uf.org)

Date Notice Provided to Florida Faculty Union Representative: \_\_\_\_\_  
OR

DATE POSTED AT WORKSITE: \_\_\_\_\_ DATE REMOVED: \_\_\_\_\_

Employer's Signature: \_\_\_\_\_

Employer's Name: \_\_\_\_\_  
(Hiring Department's Chair or Center Director)

Signature of Department Administrator Staff Member: \_\_\_\_\_

Department Administrator Staff Member: \_\_\_\_\_

Foreign National's (Employee's) Name: \_\_\_\_\_

---

**FOR ICS USE ONLY**

DATE POSTED ON UF WEBSITE: \_\_\_\_\_ DATE REMOVED: \_\_\_\_\_

RESULTS (Information provided by sponsoring department/center administrative staff member):

\_\_\_\_\_  
\_\_\_\_\_

Authorized ICS Staff member: \_\_\_\_\_

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

ETA Case Number: \_\_\_\_\_