nagarro

Labor Condition Application Posting Information

H-1B non-immigrant workers are being sought by Nagarro through the filing of a Labor condition application with the Employment and Training Administration of the U.S. Department of Labor.

Employment Information:

1. Location of Employment (City, State):	**Original LCA Addresses:** **Avista Corporation: 1411 East Mission Avenue, Spokane, WA 99252** **Home Location (Remotely): 5701 N Sheridan Rd, Apt 15 S, Chicago, IL 60660** **LCA MOVEMENT OR THE NEW LOCATION INCLUDES:** **Avista Corporation: 1411 East Mission Avenue, Spokane, WA 99252** **Home Location (Remotely): 5445 N Sheridan Rd, Apt 1108, Chicago, IL 60640** **(All Locations in the same MSA – 1600 and County – Cook)**
2. H-1B Job Title:	**Developer**
3. Period of Employment (mm/dd/year to mm/dd/year):	**07/24/2020 to 07/24/2023**
4. Occupational Classification Code:	**15-1132**
5. Total # of H-1B Non-Immigrant :	**1**
6. Range of Wage Rate Offered/Wage Offered ($):	**$87,900.00 to $89,000.00/Year**
7. ETA Case Number:	**I-200-20205-732065**

Exempt

Note:
- The labor condition application is available for public inspection at the offices of Nagarro Inc., 1737 N. First Street, Suite 590, San Jose, CA 95112.
- 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.
- Complaints alleging failure to offer employment to an equally or better qualified U.S. worker, or an employer's misrepresentation regarding such offer(s) of employment, may be filed with the Department of Justice, 10th Street & Constitution Avenue, NW., Washington, DC 20530

1737 N. First Street
Suite 590
San Jose, CA 95112
Tel: (408) 436-6170
Fax: (408) 436-7508

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Internal Use:
Posted Methods/Location: _____

_____

This is to certify that the above notice was posted for the period from **(enter posting duration)** _____ **to** _____ (for at least 10 consecutive business days).

Name/Job Title: _____Aurora Jorge – Office Manager_____

Signed by: _____