***IMPORTANT****: In accordance with 20 CFR 653.500 and 653.501(b)(1), all employers seeking intrastate or interstate recruitment of U.S. workers to perform farmwork, as identified under 20 CFR 653 subpart F, or agricultural services or labor, as defined by 20 CFR 655.103(c), on a temporary, less than year-round basis through the Agricultural Recruitment System for U.S. Workers, must submit a completed clearance order (Form ETA-790) to the State Workforce Agency (SWA). Employers submitting a clearance order in connection with an H-2A Application for Temporary Employment Certification (Form ETA-9142A) must complete the Form ETA-790 and attach a completed ETA-790A, including all required addenda. All other employers submitting clearance orders must complete the Form ETA-790 and attach a completed ETA-790B, including all required addenda. Employers and authorized preparers must read the general instructions carefully, complete ALL required fields/items containing an asterisk ( \* ), and any fields/items where a response is conditional as indicated by the section ( § ) symbol.*

**I. Clearance Order Information**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **FOR STATE WORKFORCE AGENCY (SWA) USE ONLY**  ***Questions 1 through 17*** | | | | | | |
| 1. Clearance Order Number \* | 2. Clearance Order Issue Date \* | | | | 3. Clearance Order Expiration Date \* | |
| 4. SOC Occupation Code \* | 5. SOC Occupation Title \* | | | | | |
| **SWA Order Holding Office Contact Information** | | | | | | |
| 6. Contact’s last (family) name \* | | 7. First (given) name \* | | | | 8. Middle name(s) § |
| 9. Contact’s job title \* | | | | | | |
| 10. Address 1 \* | | | | | | |
| 11. Address 2 *(suite/floor and number)* § | | | | | | |
| 12. City \* | | | | 13. State \* | | 14. Postal code \* |
| 15. Telephone number \* | 16. Extension § | | 17. Email address ***\**** | | | |

**II. Employer Contact Information**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1. Legal Business Name \* | | | | | |
| 2. Trade Name/Doing Business As (DBA), if applicable § | | | | | |
| 3. Contact’s last (family) name \* | | 4. First (given) name \* | | | 5. Middle name(s) § |
| 6. Contact’s job title \* | | | | | |
| 7. Address 1 \* | | | | | |
| 8. Address 2 *(suite/floor and number)* § | | | | | |
| 9. City \* | | | | 10. State \* | 11. Postal code \* |
| 12. Telephone number \* | 13. Extension § | | 14. Business email address ***\**** | | |
| 15. Federal Employer Identification Number *(FEIN from IRS)* \* | | | | 16. NAICS Code\* | |

**III. Type of Clearance Order**

|  |  |
| --- | --- |
| 1. Indicate the type of agricultural clearance order being placed with the SWA for recruitment of U.S. workers. *(choose only one)* \* | ❑ 790A (placed in connection with an H-2A application)  ❑ 790B (not placed in connection with an H-2A application) |

**For Public Burden Statement, see the Instructions for Form ETA-790/790A.**