

START HERE - Please Type or Print

Part 1. Information about the employer filing this petition.
If the employer is an individual, use the top name line. Organizations should use the second line.

| | | |
|---|--|---------------------------|
| Family Name | Given Name | Middle Initial |
| Company or Organization Name | World & Islam Studies Enterprise, Inc. | |
| Address - Attn: Timothy M. Spridgeon, Esquire | | |
| Street Number and Name | 315 East Madison Street | Apt. # 1000 |
| City | Tampa | State or Province Florida |
| Country | U.S.A. | ZIP/Postal Code 33602 |

IRS Tax # 59-3063697

Part 2. Information about this Petition.
(See instructions to determine the fee.)

1. Requested Nonimmigrant Classification: H-1B
(write classification symbol at right)

2. Basis for Classification (check one)
 New employment
 Continuation of previously approved employment without change
 Change in previously approved employment
 New employment employment

3. Prior petition(s) checked other than "New Employment" in item 2. (above) give the most recent prior petition number for the worker(s): N/A

4. Requested Action(s) (check one)
 a. Notify the office in Part 4 so the person(s) can obtain a visa or be admitted (NOTE: petition is not required for an E-1, E-2, or R visa).
 b. Change the person(s) status and extend their stay since they are all now in the U.S. in another status (see instructions for limitations). This is available only where you check "New Employment" in item 2, above.
 c. Extend or amend the stay of the person(s) since they now hold this status.

5. Total number of workers in petition: one(1)
(See instructions for where more than one worker can be included.)

Part 3. Information about the person(s) you are filing for.
Complete the blocks below. Use the continuation sheet to name each person included in this petition.

If an entertainment group, give their group name.

| | | | | | |
|--|-----------------|--------------------------|--------------------|----------------|------|
| Family Name | SHALLAH | Given Name | Ramadan | Middle Initial | A.M. |
| Date of Birth (Month/Day/Year) | January 1, 1958 | Country of Birth | Gaza Strip | | |
| Social Security # | 589-17-6824 | A # | None | | |
| If in the United States, complete the following: | | | | | |
| Date of Arrival (Month/Day/Year) | June 27, 1993 | I-94 # | 194961874 03 | | |
| Current Nonimmigrant Status | B-1 | Expires (Month/Day/Year) | September 26, 1993 | | |

GOVERNMENT EXHIBIT

Exhibit No.: 18-A

Case No.: 8:03-CR-77-T-30TBM

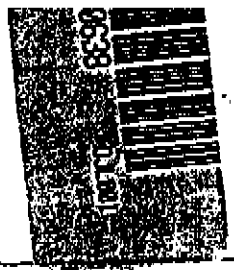
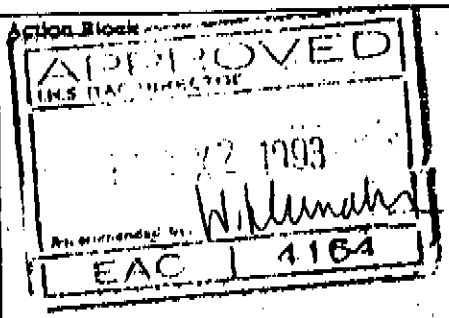
UNITED STATES OF AMERICA

vs.

SAMI AMIN AL-ARIAN, ET AL.

Date Identified: _____

Date Admitted: _____

| | |
|---|---|
| Reloc Rec'd |  |
| Interviewed | |
| <input type="checkbox"/> Petitioner | |
| <input type="checkbox"/> Beneficiary | |
| Class: <u>H</u> | |
| # of Workers: <u>1</u> | |
| Priority Number: | |
| Validity Dates: From <u>10-1-93</u> | |
| To <u>9-30-96</u> | |
| <input checked="" type="checkbox"/> Classification Approved | |
| <input type="checkbox"/> Consulate/POE/PFI Notified | |
| AC | |
| <input type="checkbox"/> Extension Granted | |
| <input checked="" type="checkbox"/> COS/Extension Granted | |
| Partial Approval (explain) | |
| Action Block |  |

To Be Completed by Attorney or Representative, if any
 Fill in box if G-28 is attached to represent the applicant

VOLAG# _____
 ATTY State License # FL# 278904

Part 4. Processing Information.

a. If the person named in Part 3 is outside the U.S. or a requested extension of stay or change of status cannot be granted, give the U.S. consulate or inspection facility you want notified if that petition is approved.

Type of Office (check one): Consulate Pre-flight inspection Port of Entry
 Office Address (City) London U.S. State or Foreign Country England

Person's Foreign Address: 20 Landsdowne Ave., Slough, Berkshire SL1 3SJ U.K.

- b. Does each person in this petition have a valid passport?
 Not required to have passport No - explain on separate paper Yes
- c. Are you filing any other petitions with this one? No Yes - How many? _____
- d. Are applications for replacement/initial I-94's being filed with this petition? No Yes - How many? _____
- e. Are applications by dependents being filed with this petition? No Yes - How many? _____
- f. Is any person in this petition in exclusion or deportation proceedings? No Yes - explain on separate paper
- g. Have you ever filed an immigrant petition for any person in this petition? No Yes - explain on separate paper
- h. If you indicated you were filing a new petition in Part 2, within the past 7 years has any person in this petition:
 1) ever been given the classification you are now requesting? No N/A Yes - explain on separate paper
 2) ever been denied the classification you are now requesting? No Yes - explain on separate paper
- i. If you are filing for an entertainment group, has any person in this petition not been with the group for at least 1 year?
 No N/A Yes - explain on separate paper

Part 5. Basic Information about the proposed employment and employer.

Attach the supplement relating to the classification you are requesting.

| | | | |
|--|---|--|--|
| Job Title | Research Associate | Nontechnical Description of Job | Academic Research |
| Address where the person(s) will work if different from the address in Part 1. | 5620 E. Fowler Ave., Suite 3, Tampa, Florida 33617 | | |
| Is this a full-time position? | <input type="checkbox"/> No - Hours per week | <input checked="" type="checkbox"/> Yes | Wages per week or per year \$28,000.00 |
| Other Compensation (Explain) | None | Value per week or per year N/A | Dates of intended employment From: 10/01/93 To: 09/30/96 |
| Type of Petitioner - check one: | <input type="checkbox"/> U.S. citizen or permanent resident | <input checked="" type="checkbox"/> Organization | <input type="checkbox"/> Other - explain on separate paper |
| Type of business | Non-profit academic research facility. | | Year established: 1991 |
| Current Number of Employees | 3 Full-time 2 Part-time 5 Volunteers | Gross Annual Income Non-profit | Net Annual Income Budget \$150,000.00 |

Part 6. Signature.

Read the information on penalties in the instructions before completing this section.

I certify, under penalty of perjury under the laws of the United States of America, that this petition, and the evidence submitted with it, is all true and correct. If filing this on behalf of an organization, I certify that I am empowered to do so by that organization. If this petition is to extend a prior petition, I certify that the proposed employment is under the same terms and conditions as in the prior approved petition. I authorize the release of any information from my records, or from the petitioning organization's records, which the Immigration and Naturalization Service needs to determine eligibility for the benefit being sought.

| | | |
|-----------------------------------|-------------------------|--------|
| Signature and title | Print Name | Date |
| <i>Sami A. Al-Arian, Chairman</i> | Sami Al-Arian, Chairman | 9/8/93 |

Please Note: If you do not completely fill out this form and the required supplement, or fail to submit required documents listed in the instructions, then the person(s) filed for may not be found eligible for the requested benefit, and this petition may be denied.

Part 7. Signature of person preparing form if other than above.

I declare that I prepared this petition at the request of the above person and it is based on all information of which I have any knowledge.

| | | |
|-----------|------------|------|
| Signature | Print Name | Date |
| | | |

Firm Name and Address

U.S. Department of Justice
Immigration and Naturalization Service

Name of person or organization filing petition:
World & Islam Studies Enterprise, Inc.

Name of person or total number of workers or trainees you are filing for:
Ramadan A.M. Shallah

List the alien's and any dependent family members; prior periods of stay in H classification in the U.S. for the last six years. Be sure to list only those periods in which the alien and/or family members were actually in the U.S. in an H classification. If more space is needed, attach an additional sheet.

None

Classification sought (check one):

- H-1A Registered Professional nurse
- H-1B1 Specialty occupation
- H-1B2 Exceptional services relating to a cooperative research and development project administered by the U.S. Department of Defense
- H-1B3 Artist, entertainer or fashion model of national or international acclaim

- H-1B4 Artist or entertainer in unique or traditional art form
- H-1B5 Athlete
- H-1B6 Essential Support Personnel for H-1B entertainer or athlete
- H-2A Agricultural worker
- H-2B Nonagricultural worker
- H-3 Trainee
- H-3 Special education exchange visitor program

Section 1. Complete this section if filing for H-1A or H-1B classification.

Describe the proposed duties

General research regarding Islamic and Middle-Eastern economics and banking.

Alien's present occupation and summary of prior work experience

University professor of economics at Islamic University of Gaza since 1982.

Statement for H-1B specialty occupations only:

By filing this petition, I agree to the terms of the labor condition application for the duration of the alien's authorized period of stay for H-1B employment.

Petitioner's Signature

Date

Sam A. Al-Ghann

9/8/93

Statement for H-1B specialty occupations and DOD projects:

As an authorized official of the employer, I certify that the employer will be liable for the reasonable costs of return transportation of the alien abroad if the alien is dismissed from employment by the employer before the end of the period of authorized stay.

Signature of authorized official of employer

Date

Sam A. Al-Ghann

9/8/93

Statement for H-1B DOD projects only:

I certify that the alien will be working on a cooperative research and development project or a coproduction project under a reciprocal Government-to-Government agreement administered by the Department of Defense.

DOD project manager's signature

Date

Section 2. Complete this section if filing for H-2A or H-2B classification.

Employment is:
(check one)

- Seasonal
- Peakload
- Intermittent
- One-time occurrence

Temporary need is:
(check one)

- Unpredictable
- Periodic
- Recurrent annually

Explain your temporary need for the alien's services (attach a separate paper if additional space is needed).

Section 3. Complete this section if filing for H-2A classification.

The petitioner and each employer consent to allow government access to the site where the labor is being performed for the purpose of determining compliance with H-2A requirements. The petitioner further agrees to notify the Service in the manner and within the time frame specified if an H-2A worker absconds or if the authorized employment ends more than five days before the relating certification document expires, and pay liquidated damages of ten dollars for each instance where it cannot demonstrate compliance with this notification requirement. The petitioner also agrees to pay liquidated damages of two hundred dollars for each instance where it cannot be demonstrated that the H-2A worker either departed the United States or obtained authorized status during the period of admission or within five days of early termination, whichever comes first.

The petitioner must execute Part A. If the petitioner is the employer's agent, the employer must execute Part B. If there are joint employers, they must each execute Part C.

Part A. Petitioner:

By filing this petition, I agree to the conditions of H-2A employment, and agree to the notice requirements and limited liabilities defined in 8 CFR 214.2 (h) (3) (v).

Petitioner's signature

Date

Part B. Employer who is not petitioner:

I certify that I have authorized the party filing this petition to act as my agent in this regard. I assume full responsibility for all representations made by this agent on my behalf, and agree to the conditions of H-2A eligibility.

Employer's signature

Date

Part C. Joint Employers:

I agree to the conditions of H-2A eligibility.

Joint employer's signature(s)

Date

Joint employer's signature(s)

Date

Joint employer's signature(s)

Date

Joint employer's signature(s)

Date

Joint employer's signature(s)

Date

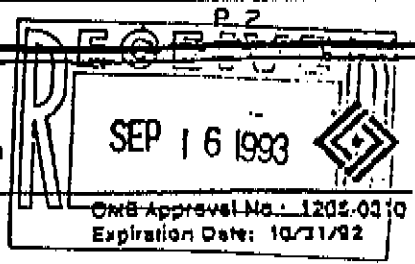
Section 4. Complete this section if filing for H-3 classification.

If you answer "yes" to any of the following questions, attach a full explanation.

- | | | |
|--|-----------------------------|------------------------------|
| a. Is the training you intend to provide, or similar training, available in the alien's country? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| b. Will the training benefit the alien in pursuing a career abroad? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| c. Does the training involve productive employment incidental to training? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| d. Does the alien already have skills related to the training? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| e. Is this training an effort to overcome a labor shortage? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |
| f. Do you intend to employ the alien abroad at the end of this training? | <input type="checkbox"/> No | <input type="checkbox"/> Yes |

If you do not intend to employ this person abroad at the end of this training, explain why you wish to incur the cost of providing this training, and your expected return from this training.





Labor Condition Application for H-1B Nonimmigrants

U.S. Department of Labor
Employment and Training Administration
U.S. Employment Service

1. Full Legal Name of Employer
World & Islam Studies Enterprise, Inc.

3. Employer's Address
(No., Street, City, State, and ZIP Code)

2. Federal Employer I.D. Number
59-3063697

**5620 E. Fowler Avenue, Ste. 3
Tampa, Florida 33617**

3. Telephone No.
813, 985-4343

6. Address Where Documentation is Kept (if different than item 5)
Same as #5

4. FAX No.
813, 985-4664

7. OCCUPATIONAL INFORMATION (Use attachment if additional space is needed)

| (a) Three-Digit Occupational Groups Code | (b) Job Title (Check box if position is part-time) | (c) No. of H-1B Nonimmigrants | (d) Rate of Pay | (e) Period of Employment From To | (f) Location(s) Where H-1B Nonimmigrants Will Work (see instructions) |
|--|--|-------------------------------|-----------------|----------------------------------|---|
| .109 | Research Associate <input type="checkbox"/> | One (1) | \$28,000.00/yr. | 10/01/93 09/30/96 | Tampa, FL |
| | | | | | |
| | | | | | |

8. EMPLOYER LABOR CONDITION STATEMENTS (Employers are required to develop and maintain documentation supporting labor condition statements 8(a) and 8(d). Employers are further required to make available for public examination a copy of the labor condition application and necessary supporting documentation within one (1) working day after the date on which the application is filed with DOL. Check each box to indicate that the employer will comply with each statement.)

- (a) H-1B nonimmigrants will be paid at least the actual wage level paid by the employer to all other individuals with similar experience and qualifications for the specific employment in question or the prevailing wage level for the occupation in the area of employment, whichever is higher.
- (b) The employment of H-1B nonimmigrants will not adversely affect the working conditions of workers similarly employed in the area of intended employment.
- (c) On the date this application is signed and submitted, there is not a strike, lockout or work stoppage in the course of a labor dispute in the occupation in which H-1B nonimmigrants will be employed at the place of employment.
- (d) As of this date, notice of this application has been provided to workers employed in the occupations in which H-1B nonimmigrants will be employed; (check appropriate box)
 - (i) Notice of this filing has been provided to the bargaining representative of workers in the occupations in which H-1B nonimmigrants will be employed; or
 - (ii) There is no such bargaining representative; therefore, a notice of this filing has been posted and was, or will remain, posted for 10 days in a conspicuous place where H-1B nonimmigrants will be employed.

9. DECLARATION OF EMPLOYER. Pursuant to 28 U.S.C. 1746, I declare under penalty of perjury that the information provided on this form is true and correct. In addition, I declare that I will comply with the Department of Labor regulations governing this program and, in particular, that I will make this application, supporting documentation, and other records, files and documents available to officials of the Department of Labor, upon such official's request, during any investigation under this application or the Immigration and Nationality Act.

Sami Al-Arian, Chairman
Name and Title of Hiring or Other Designated Official

[Signature]
Signature

9/16/93
Date

AN APPLICATION CERTIFIED BY DOL MUST BE FILED IN SUPPORT OF AN H-1B VISA PETITION WITH THE INS. FOR U.S. GOVERNMENT AGENCY USE ONLY: By virtue of my signature below, I acknowledge that this application is hereby certified and will be valid from 10-1-93 through 9-30-96.

[Signature]
Signature and Title of Authorized DOL Official

214827
ETA Case No.

Subsequent DOL Action: Certified Denied Invalidated (date) Withdrawn (date)

The Department of Labor is not the guarantor of the accuracy, truthfulness or adequacy of a certified labor condition application.
Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Office of IRM Policy, Department of Labor, Room N-1301, 200 Constitution Avenue, N.W., Washington, DC 20210; and to the Office of Management



SUMMARY OF EMPLOYMENT
OFFER TO DR. RAMADANA A. SHALLAH

Position: Research Associate
Salary: \$ 28,000.00 per year
Period of Employment: October 1, 1993 to September 30, 1996
Benefits: None

W. I. S. E., Inc.

SAMI AL-ARIAN, Chairman



October 26, 1993

Immigration and Naturalization Service
Eastern Regional Service Center
75 Lower Weldon Street
St. Albans, VT 05479-0001

Re: H-1B Petition on Behalf Ramadan A.M. Shallah

To Whom It May Concern:

World & Islam Studies Enterprise, Inc. (W.I.S.E.) is a non-profit interdisciplinary research center devoted to the study of scientific, historical, economic, and strategic issues of concern to the Muslim and Arab Worlds. The center conduct research, publishes scholarly books and articles, and conducts academic conferences on these issues, often in association with the University of South Florida.

We are seeking to employ Dr. Shallah as a Research Associate to conduct research with regard to Islamic and Middle Eastern economics and banking. In this position, his duties will include the planing, designing, and conducting of research, establishing an efficient data base and bibliography, and participating in related seminars, workshops, and lectures sponsored by W.I.S.E. In this regard, Dr. Shallah will study economic and statistical data, devise methods and procedures for collecting and processing the various economic and sampling techniques. He will compile file, review, and analyze the data to prepare reports detailing the results of his investigation and to stay abreast of economics changes. He will also organize the data into report format and arrange for the preparation of graphic illustration of his research findings. From this he will formulate recommendations and participate in a general economic "task forces" formed in collaboration with other Middle Eastern and U.S. educational and research institutions.

This type of research can only be performed by someone with a high level of academic training in the area of Middle Eastern and Islamic economics and banking. It is necessary that the individual have a doctorate degree in this area in order to conduct the type of research that we need. In this regard, Dr. Shallah clearly meets this requirement in that he has a Ph.D. in economics, concentrating on Islamic economics, Middle Eastern economics, Monetary economics and finance and banking. The documents we submitted with our initial petition clearly support his education and its concentration on these areas.

Currently, W.I.S.E. has 3 other researchers. Each of these have at least a Masters Degree in a field related to their research.



The position of Research Associate is a position within the academic community which generally requires at least a Masters Degree and often a Ph.D. in the area of study being researched.

If you need any further information, please do not hesitate to contact our attorney, Timothy M. Spridgeon, and he will provide the same to you at his earliest opportunity.

Sincerely,

Sami Al-Arian, Chairman
W.I.S.E, Inc.