ARKANSAS J-1 VISA WAIVER PROGRAM No Objection Practice Site Transfer Letter Requirements, In-State

No Objection letters are only provided for International Medical Graduate (IMG) physicians placed through the Arkansas J-1 Visa Waiver Program that are transferring to new practice sites because of circumstances beyond their control (i.e. facility closure, contract cancellation or employer unable to pay salary).

- 1. A letter from the IMG's physician's attorney to the AR J-1 Visa Waiver Program Administrator requesting a No Objection letter for an in-state practice site transfer.
- 2. Physician's full name, date of birth and country of nationality.
- 3. Copy of DS-3035.
- 4. DOS file number.
- 5. Old work site name, address, county, underservice designation number and administrator/CEO name. If more than one work site state work site name, address, county, underservice designation number, administrator/CEO name and the amount of time spent at each for all additional work sites.
- 6. Copy of IMG's physician's employment commitment letter from the new site.
- 7. Detailed explanation of physician's reason(s) for seeking a transfer of practice sites before the original three-year term of contract has ended.
- 8. Evidence that current practice site administrator has been notified of the physician's pending transfer.
- 10. Copy of new contract covering remaining term of physician's three-year obligation.

The original No Objection to Transfer of Practice Site letter will be mailed to the requesting attorney.

Send request to:

J-1 Visa Waiver Program Arkansas Department of Health 4815 West Markham Slot 76 Little Rock, AR 72205