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:

Jane Gaskill, Section Counsel
J-1 Visa Waiver Program
Arkansas Department of Health
Freeway Medical Building
5800 West 10th Street, Suite 400
Little Rock, AR  72204-1704