Application Processing Instructions

The checklist below provides an overview of the basic requirements for applicants seeking sponsorship to participate in non-standard clinical training programs for the 2022/2023 academic year. Such programs must be recognized by the appropriate American Board of Medical Specialties (ABMS) member board and the host institution’s Graduate Medical Education Committee (GMEC). Note that submission of a complete on-line application requires close coordination between each applicant and the Training Program Liaison (TPL) at the teaching hospital. While ECFMG generally reserves six to eight weeks from the time all required documentation is received for review and processing, it is important to note that submission of all required documentation at the same time may significantly shorten processing time. Therefore, applicants and TPLs are encouraged to upload all required documentation on the same day, when possible. Note also that EVSP will match the original Statement of Need (SoN) received from the home country government with the pending application. Applicants can verify that a SoN has been received by checking the On-line Applicant Status and Information System (OASIS) regularly. Any application deficiencies and/or requests for additional documentation will be communicated directly by ECFMG to the TPL via e-mail. Applicants are able to view deficiency letters in OASIS. It is recommended that applicants and/or TPLs retain a copy of all uploaded materials.

**DOCUMENTATION CHECKLIST**

**STEPS IN THE APPLICATION PROCESS:**
The application process requires completion of the following steps:

1. Through EVNet, TPL submits an on-line appointment profile
2. Through EVNet, TPL uploads the necessary supporting documents for each applicant (With the exception of the SoN; see below for details)
3. Through OASIS, applicant accepts on-line appointment profile, pays the $360 administrative/application fee, completes the electronic application, and uploads any documentation (not already submitted by the TPL) needed to complete application
4. Electronically or by mail/courier service, Ministry of Health official or applicant submits the original SoN (see below for details)

**NOTE:** All uploaded documents must be in PDF format and must be uploaded one document at a time.

**Documentation Required of all Initial Applicants (non-standard programs)**

**CONTRACT OR LETTER OF OFFER**

The contract or letter of offer must specify:
- Start and end dates of the training year,
- Specialty and subspecialty of the training program/pathway,
- Training level,
- Stipend,
- And must be signed by both the applicant and an appropriate hospital official.

**STATEMENT OF NEED (SoN)**

An original, official SoN issued directly from the Ministry of Health in the country of most recent legal permanent residence must be submitted directly to ECFMG. SoN letters are accepted in two ways—electronically OR by mail/courier service.

Regardless of submission method, per the U.S. Code of Federal Regulations (CFR), all SoNs must:
- Be issued by the federal/central office of the applicant’s country of most recent legal permanent residence
- Be issued on official Ministry of Health letterhead and addressed to ECFMG
- Exactly follow prescribed wording outlined in the U.S. Code of Federal Regulations (CFR) §62.27
- Specify a need that exactly matches the name of the training specialty/subspecialty being pursued

Whether an SoN is sent **electronically or by mail/courier service**, there are specific, respective submission procedures and requirements. If an SoN is received that does not meet these requirements, it will not be accepted.

View the submission requirements, and the required SoN format and wording, on the EVSP website at [http://www.ecfmg.org/evsp/snletter.htm](http://www.ecfmg.org/evsp/snletter.htm).
• Contain the official stamp or seal of the issuing government and dated signature of issuing official on the SoN
• Be issued in English; if not issued in English, a certified word-for-word English translation is required (again, please note that the SoN and any translation must follow regulatory prescribed language)

It is important to note that the source country for the SoN cannot be changed once an applicant acquires J-1 status. Any/all subsequent SoNs must be issued from the same source country.

☐ TRAINING PROGRAM DESCRIPTION (if entering subspecialty training)

☐ AMERICAN BOARD OF MEDICAL SPECIALTIES (ABMS) MEMBER BOARD RECOGNITION
ABMS Member Board recognition is required for the specific advanced subspecialty discipline being pursued. A listing of recognized non-standard subspecialty disciplines can be found here: https://www.ecfmg.org/evsp/recognized-nst-subspecialties.pdf. Only those disciplines listed qualify for ECFMG sponsorship. The ABMS Member Boards are no longer writing individual letters or recognizing new disciplines. Learn more about the pending transition to ACGME recognition for Sponsoring Institutions on the EVSP website at https://www.ecfmg.org/evsp/applying-types-nonstandard.html.

☐ GRADUATE MEDICAL EDUCATION COMMITTEE (GMEC) ENDORSEMENT & PROGRAM VERIFICATION FORM
Representatives of the host institution are required to complete the form as directed. The form is available at http://www.ecfmg.org/evsp/evspvergmec.pdf. Note: Program Director’s (PD) signature must be from the PD of the ACGME-accredited parent program.

☐ APPLICANT STATEMENT OF EDUCATIONAL OBJECTIVES
The applicant must outline his/her overall educational objectives as an ECFMG-sponsored exchange visitor physician and how they relate to future professional activities upon return to his/her home country. This statement must be signed and must detail the proposed training plan and anticipated duration of U.S. training. Applicants are encouraged to disclose both their short-term and long-term training objectives. The statement must be updated with each new sponsorship request.

☐ CURRENT CURRICULUM VITAE (C.V.)
The C.V. must detail a complete timeline of activities from the time of medical school graduation onward. Include education, profession, and time off in a month/year to month/year format.

☐ COPY OF PASSPORT NAME PAGE(S)
Submit a copy of the passport name page for the applicant and each dependent.

Additional Documentation (required if applicable)

☐ COPIES OF FORM(S) IAP-66 AND/OR DS-2019
Required if the applicant previously held J-1 visa status.

☐ PROOF OF COUNTRY OF MOST RECENT LEGAL PERMANENT RESIDENCE (LPR)
Required if LPR differs from country of citizenship.

☐ COPY OF FORM I-94 (arrival/departure record)
Required if applicant is in the United States at the time of application submission to ECFMG. Copies of electronically issued Form I-94 can be downloaded at www.cbp.gov/I94. Note that Form I-94 also may be attached to Form I-797, Notice of Action, issued by the U.S. Department of Homeland Security.

☐ OFFICIAL DOCUMENTATION OF FUNDING SOURCE*
Provides proof of funding by the organization paying the trainee directly or confirmation of the applicant’s personal funds if the source of funding is other than, or in addition to, the salary provided by the teaching hospital where the training will take place.

• Outside Organization: A signed letter, on organizational letterhead, from an official of the organization providing direct funding to the applicant. The letter must include the terms and conditions, dates, and amount in U.S. dollars.

• Personal Funds: Submission of a letter signed by a bank official or a copy of a bank statement on letterhead confirming the (self) funding amount specified in the on-line application. Foreign currency amounts must also include U.S. dollar equivalent. IMPORTANT: Letters and/or statements issued by a bank should not show personal account information such as account number or personal identifier.

*Minimum funding levels are $1,600 per month for the exchange visitor physician, $600 per month for a J-2 spouse, and $400 per month per child (any status).
**EVIDENCE OF FAMILY RELATIONSHIP (marriage/birth/adoption certificate)**

Required if requesting J-2 dependent sponsorship for a spouse and/or an unmarried minor child. If not in English, the certificate(s) must include a certified, word-for-word English translation(s).

**RETURN SHIPPING LABEL FOR EXPEDITED DELIVERY TO THE TPL (optional, but recommended)**

If an application is approved, ECFMG will issue Form DS-2019, *Certificate of Eligibility for Exchange Visitor (J-1) Visa Status*, to the TPL via first-class U.S. mail. ECFMG is not authorized to release the Form DS-2019 directly to an applicant. For expedited and trackable delivery, applicants must upload a prepaid/preaddressed courier service shipping label at the time of application (prior to application review by EVSP). EVSP staff cannot complete a shipping label on behalf of an applicant or institution. See [https://www.ecfmg.org/evsp/applying-fees.html](https://www.ecfmg.org/evsp/applying-fees.html) for additional information on the use of shipping labels.

**REQUIREMENTS FOR GRADUATES OF LIAISON COMMITTEE ON MEDICAL EDUCATION (LCME)-ACCREDITED U.S. OR CANADIAN MEDICAL SCHOOL PROGRAMS**

- **COPY OF MEDICAL SCHOOL DIPLOMA:** A certified, word-for-word English translation must accompany a non-English document.
- **ENGLISH LANGUAGE ATTESTATION FORM:** Required if the applicant is a graduate of an LCME-accredited Canadian medical school and is not ECFMG certified (see [http://www.ecfmg.org/evsp/attestation.pdf](http://www.ecfmg.org/evsp/attestation.pdf)).
- **FULL-FACE PASSPORT-SIZED PHOTOGRAPH:** Uploaded as JPG.

**CHANGE OF CATEGORY AND PROGRAM TRANSFER REQUEST DOCUMENTATION**

Required if the applicant is currently in J-1 status (e.g., J-1 “research scholar”) and plans to seek a change of category and program transfer through the U.S. Department of State (DoS). Detailed information and documentation requirements for applicants seeking a change of category are available on the EVSP website at [http://www.ecfmg.org/evsp/evspcocmemo.pdf](http://www.ecfmg.org/evsp/evspcocmemo.pdf).