

EXAMPLE PHYSICIAN STATEMENT FOR US DOS

The Waiver Review Division
AC/VO/L/W/, Visa Service
US Department of State
2401 E Street NW (SA-1)
Washington, D.C. 20226-0006

Dear Sir or Madam:

I am applying for a waiver for the two-year home country requirement. At the time I obtained my J-1 exchange visitor status, I fully intended to honor my two-year home country residence requirement.

However, the U.S. Government has created a new program by which my services can be of value in a Health Professional Shortage Area in Washington State. Therefore, I have decided to help by serving patients in _____ County, Washington, which has a Health Professional Shortage Area designation.

Physician's Signature

Date