J-1 Visa Waiver Recommendation Application OMB



Bureau of Consular Affairs

Consular Systems and Technology



Welcome to J Visa Waiver Online



Welcome to J Visa Waiver Online!

Certain exchange visitors are subject to the two-year foreign residence requirement of Section 212(e) of the Immigration and Nationality Act. This web site allows exchange visitors desiring a waiver of 212(e) to reserve a case number and begin the paperwork for their request to the Department of State Waiver Review Division for a waiver recommendation. The exchange visitor or representative controls the data entry to ensure an error-free submission. J Visa Waiver Online creates a bar-coded document that will facilitate processing by the Waiver Review Division. As a result, processing times will be reduced. Those exchange visitors with case numbers can submit changes to their contact information or check the status of their case file.

IMPORTANT: It is not currently possible to "submit" the data electronically, or to pay any fees online. All documentation and fees must continue to be mailed to the Department of State.

Notice: Effective December 1, 2008 submissions of the downloaded form DS-3035 will no longer be accepted.

What would you like to do?

- Complete an online application for a J-1 waiver recommendation.
- Complete a survey to help clarify whether you may be subject to 212(e)

If you already have a Waiver Review case number, you may:

- . Check the status of a request for a waiver of the two-year home residence requirement
- Inform the Department of State of a change to personal data (such as mailing address, email, phone, etc.)
- · Create a statement of reason

System Requirements - Important:

- Internet browser Netscape (version 4.7 or higher) or Internet Explorer (version 5.0 or higher) must be installed on this computer.
- Ensure that a working printer with paper and black ink is accessible from this computer.
- You must have a copy of Adobe Acrobat Reader (version 5 or higher) installed on this computer. If you need the Adobe Reader, click the icon below:





Privacy and Computer Fraud and Abuse Act Notices



Privacy and Computer Fraud and Abuse Act Notices

Privacy Act Notice

For site management, information is collected for statistical purposes. The Department of State Web Site uses software programs to create summary statistics for such purposes as assessing what information is of most and least interest or identifying system performance or problem areas. The following is the type of information collected about your visit to the web site: the name of the Internet domain from which you access State Department web sites (for example, "aol.com" if you are connecting from America Online) and the date and time you access our site. If you choose to provide us with personal information in an email message, we use it only to respond to your email.

For site security purposes and to ensure that this service remains available to all users, the State Department uses software programs to monitor network traffic to identify unauthorized attempts to upload or change information or otherwise cause damage. Unauthorized attempts to upload information or change information on this service are strictly prohibited and may be punishable under the Computer Fraud and Abuse Act of 1986. Information also may be used for authorized law enforcement investigations. Except for the above purposes, no other attempts are made to identify individual users or their usage habits.

Computer Fraud and Abuse Act

Unauthorized attempts to upload information and/or change information on these web sites are strictly prohibited and are subject to prosecution under the Computer Fraud and Abuse Act of 1986 and Title 18 U.S.C. Sec.1001 and 1030.

Furthermore, the Department of State assures that it will not

- obtain personal identifying information about you, unless you choose to provide such information
- share any information it receives with any outside parties, except for authorized law enforcement investigations, or as otherwise required by law.

For More Information, Contact:

Public Communication Division PA/PL, Room 2206 U.S. Department of State Washington, D.C. 20520 202-647-6575

Visit: contact-us.state.gov

(Previous Cancel

Cancel

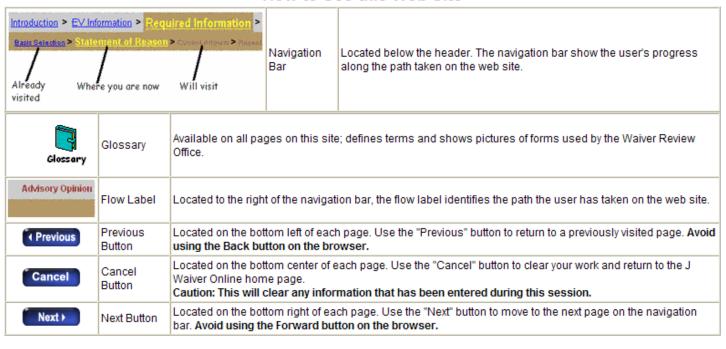
Liste is managed by the Bureau of Consular Affairs, LLS, Department of State, External links to other Internet sites should not be construed.



How to Use this Web Site



How to Use this Web Site



(Previous Next)



J-1 Waiver Recommendation Process



J-1 Waiver Recommendation Process



This web site allows a J-1 exchange visitor ("EV") to begin the process of requesting a waiver of the two-year home country requirement. Here is how the online process works:

- Type the exchange visitor's personal data into the J-1 Visa Waiver Review Application, an online version of Form DS-3035.
- Choose a basis on which he or she is applying for the waiver, such as "no objection".
- 3. The system will reserve a case number for the applicant.
- Generate document packet(s) and bar coded cover sheet(s).
- 5. Follow the mailing instructions at the end of the waiver application process.

Before you begin the process, please ensure that you have the following documentation readily available.

Each document listed below contains information that you will need in order to complete the application.

- Any passport of the exchange visitor containing his/her U.S. visas
- Legible copies of all DS-2019 (formerly IAP-66)
- Notice of Entry of Appearance as Attorney or Representative (G-28) (if applicable)
- Names and dates of birth of any J-2 dependents and/or the EV's J-1 spouse (if applicable)
- I-94 Departure Record card (if still in the U.S.)
- Alien Registration "A" Number (if applicable)

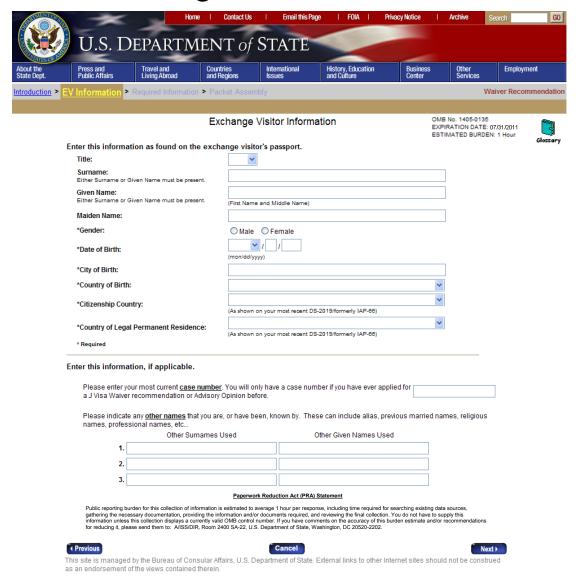
IMPORTANT NOTICE: You will have 60 minutes to complete each application page, at which point the session will automatically end. It is recommended that you complete explanatory answers in a Word or Text document first to allow yourself more time. You will be able to Cut and Paste from the Word or Text document into the application.

Note: Submitting inaccurate or incomplete information slows processing times.

↑ Previous Cancel



Exchange Visitor Information





Basis Selection



Basis Selection



Please read the following information carefully to determin	ne the basis on which Maria Sample is applying.	
No Objection statement from the home government State Health Agency Request Has the exchange visitor's government funded any portion Request by an Interested (U.S.) Government Agency Exceptional hardship to a United States citizen (or possession) Persecution	n of his/her program while under a "J" visa? Yes No	
		<u> </u>
4 Previous	Cancel	Novt



Statement of Reason



Current Address

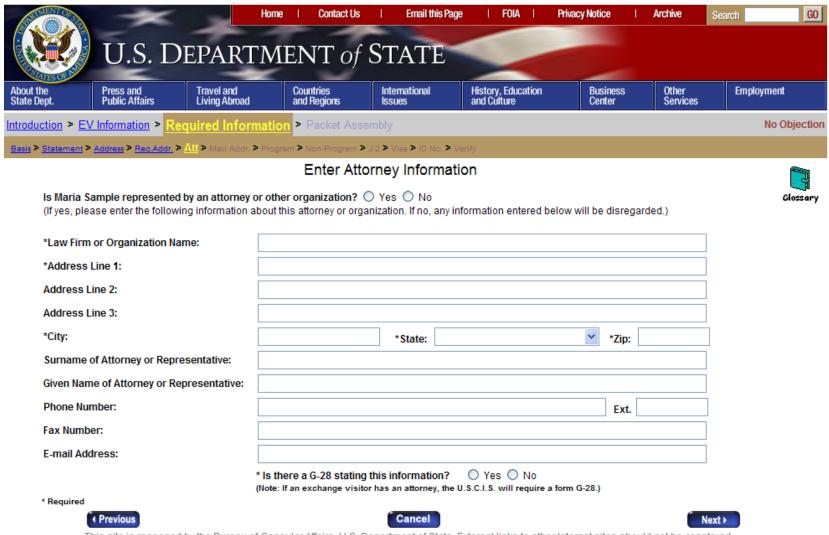
NO.	Home	l Contact Us	Email this Pa	ge FOIA	Privacy Notice	Archive	Gearch GO
TIC D)EDA DTA	ENIT of	Статг				
U.S. L)EPARTM	EN I Of	SIAIE				
About the Press and State Dept. Press and Public Affairs	Travel and Living Abroad	Countries and Regions	International Issues	History, Education and Culture	Business Center	Other Services	Employment
Introduction > EV Information > R	equired Informatio	n > Packet Asse	embly				No Objection
Basis > Statement > Address > Rec.Ad	dr. > Att > Mail Addr. > Pro	gram > Non-Program	> J-2 > Visa > ID No.	> Verify			
		Maria Sample	e's Current A	ddress			
*Address Line 1:							Glossary
Address Line 2:							
Address Line 3:							
*City:		State:		∨ Zip	:		
	·		nd Zip are required for	U.S. Addresses.			
*Country:	UNITED STATES	OF AMERICA			~		
Province (If Non-US):							
Postal Code (If Non-US):							
Home Phone Number:	OUS OForeign	ı					
Business Phone Number:	OUS OForeign	ı		Ex	t.		
Fax Number:	OUS OForeign	l					
E-mail Address:							
* Required							
(Previous	d by the Bureau of Cons	vulor Affoiro II O D	Cancel contract of State	External links to ather	Internet sites chaul	Nex	



Verify most recent U.S. city and state



Attorney Information





Mailing Address





as an endorsement of the views contained therein.

Previous Exchange Visitor Programs



Enter the following information from each exchange visitor program in which Maria Sample has participated.



- Add a new row for EACH DS-2019 form (formerly IAP-66) of the J-1 exchange visitor only. Start with the most recent DS-2019 form.
- If you are missing any forms contact the program sponsor to obtain copies or a statement indicating the information requested below.
- Click on the links below to show the different versions of the forms you may have in hand.



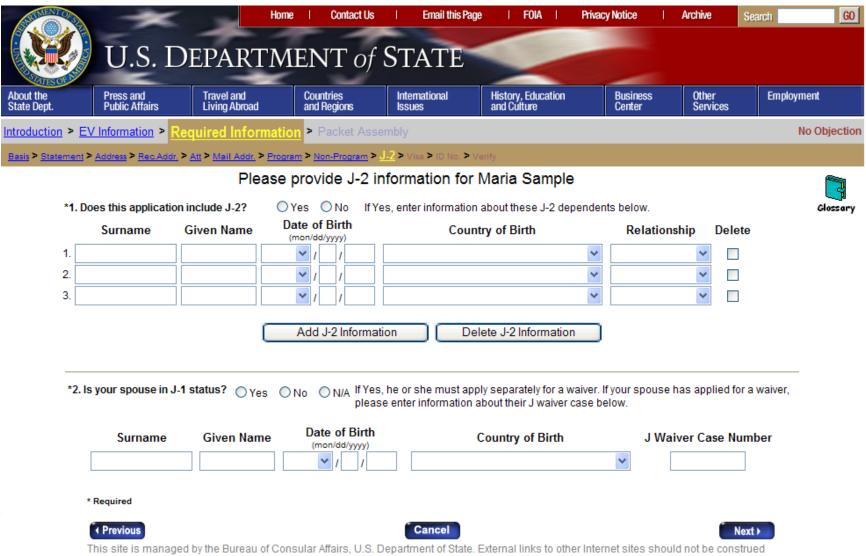


Time not Covered by DS-2019



as an endorsement of the views contained therein.

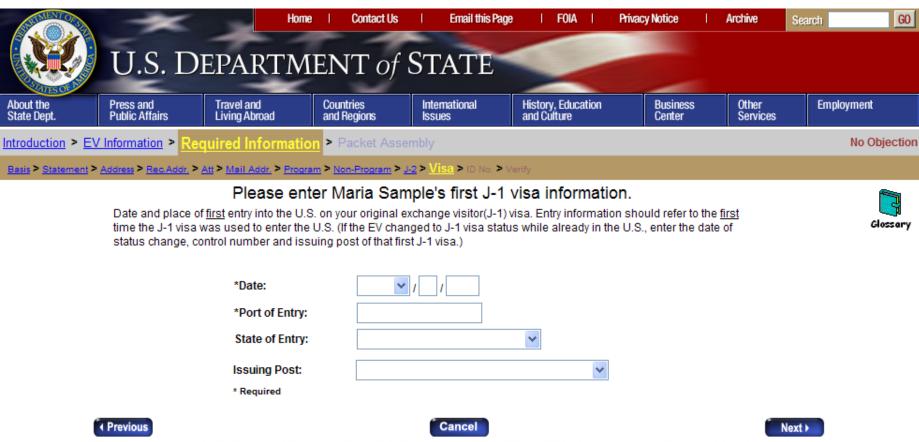
J-2 Information



as an endorsement of the views contained therein.



First J-1 Information



Identification Number



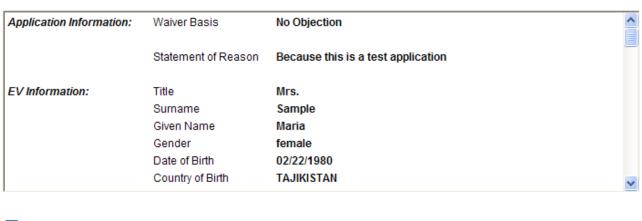
Verify Information



Please verify that the following information is correct for Maria Sample



- · Scroll down through the box if necessary
- . If any changes are needed, click on the appropriate heading on the navigation bar above, make the change, then click Next to save the change.
- When you are satisfied that all the information in the box is correct, and have indicated how you wish to receive correspondence concerning this
 application, check the box just outside the information section below and click on Next.



Check this box if all of the above information is correct.



Cancel

Next ▶

Exchange Visitor Packet



Exchange Visitor Packet for Maria Sample No Objection



Your application is almost complete. The remaining steps in the process will be for you to save and print the packets, gather hard copies of the materials needed to process your application, and mail the packets to the required destinations.

The packet will consist of items generated by J Visa Waiver Online and copies of documents you should already have. Based on your answers to the previous questions in J Visa Waiver Online, you will need to submit copies of the following items to the Department of State:

- All forms DS-2019 (formerly IAP-66)
- Copy of the data page of the EV's current passport containing name and birth date
- ✓ G-28

Please check below if you plan to include additional documentation with your application at this time:

Other

Click Next to continue. A new case number will be generated.

◆ Previous

Cancel

Next >

Display Packet



YOU ARE NOT FINISHED UNTIL THE PACKETS HAVE BEEN MAILED PLEASE READ BELOW



Your case number is 874137

Display Packet

YOU MUST CLICK THE DISPLAY PACKET BUTTON ABOVE IN ORDER TO COMPLETE THE FINAL STEPS OF THIS PROCESS.

Display Packet will open up a separate browser where you will save your packets to a PDF file, print your packets and follow the instructions on each page.

This case number is NOT recorded in the J Visa Waiver Online Status Check system until the paper application and fee have been received in the mail and processed by the Department of State.

Please wait several weeks after mailing your documentation before using this case number to check your status online. Please be patient, as incoming mail to the Department of State may be subject to delays.

IMPORTANT: This PDF file will be read-only. If something is incorrect, you can still change it by using the Navigation Bar above or the Previous button to return to the appropriate page, correct the information, then click Next on the page you corrected so that the new data will be saved. Leaving this page in any other fashion will end the process, no longer allowing you to change your packet information.

Thank you for using the J Visa Waiver Online Application System



Cancel



Page 1 of Packet

KEEP THIS PAGE FOR YOUR RECORDS

REEP THIS PAGE FOR YOUR RECORDS
Packet Assembly Checklist - J-1 Visa Waiver Recommendation Application Use this checklist to organize the pages in the J Visa Waiver Recommendation Application packet
Case Number: 874137 Applicant Name: Maria Sample Applicant DOB: 02/22/1980 Applicant COB: TAJIKISTAN Waiver Basis: No Objection
Check that the exchange visitor's case number and country of last residence is written on any documentation submitted, as well as on the outside envelope of ALL future correspondence with the
Packet 1. Destination: Department of State, St. Louis, MO Please assemble packet in this order: (Items with a * have been generated in PDF format)
Application fee: Follow the detailed instruction on DS-3035, page 1
Waiver Review Division Barcode Page *: Accompanies the DS-3035
Form DS-3035, pages 1,2 and 3 *: Follow the detailed mailing instructions on page 1. The applicant must sign on line 21. If the form is being prepared by an attorney, the attorney needs to sign on line 9.
Supplementary Applicant Information pages *: Accompanies the DS-3035
Copy of the data page of the EV's current passport containing name and birth date
Copies of all forms DS-2019 (formerly IAP-66)
Statement of Reason *
G-28
Self addressed, stamped envelope
Additional items as indicated by the applicant
*** Be sure to sign Form DS-3035, line 21 ***
Probability Company of the contrary of the
Packet 2. Destination: Embassy of the exchange visitor
Third Party Barcode Page *: Follow detailed instructions on the page.
The Waiver Review Division will forward a recommendation directly to the United States Citizenship and Immigration Services (USCIS).
IMPORTANT NOTE: Once the Maiver Review Division forwards a waiver recommendation to the USCIS, the case is considered closed at the Department of State. Any further action on the case falls under the jurisdiction of the USCIS. To follow-up on the waiver recommendation, please contact the USCIS Service Center.
DO NOT SEND THIS PAGE. KEEP THIS PAGE FOR YOUR RECORDS



Page 2 of Packet

Waiver Review Division Barcode Page

 $874137,\ \mathtt{Sample},\ \mathtt{Maria},\ 02/22/1980,\ \mathtt{COB}\colon\ \mathtt{TAJIKISTAN},\ \mathtt{COR}\colon\ \mathtt{TAJIKISTAN},\ \mathtt{No}\ \mathtt{Objection}$









Page 3 of Packet

U. S. Department of State

OMB No. 1405-0136 EXPRATION DATE STORGEST ESTIMATED BURDEN: 1 Hour

J-1 VISA WAIVER RECOMMENDATION APPLICATION INSTRUCTIONS

Keep this page for your records

Complete the following two pages of this form and send them, along with the fee and supporting documentation listed below, to:

> U.S. Department of State Waiver Review Division P.O. Box 952137 St. Louis, MO 63195-2137

PLEASE DO NOT STAPLE ANY DOCUMENTS

PLEASE AVOID TWO-SIDED DOCUMENTS AND ONLY USE 8 1/2" X 11" PAPER

Supporting documents and fee:

- Application fee of 9215 PER J-1 APPLICANT. Please send a cashier's check or money order in U.S. currency drawn on a U.S. bank, made payable to THE U.S. DEPARTMENT OF STATE. Include your name, date and place of birth on whatever form of payment you submit. DO NOT SUBMIT MORE THAN ONE APPLICATION FEE PER PERSON:
- 2. Any additional pages needed to full respond to the questions in this form;
- A statement demonstrating why the exchange visitor is eligible to receive a waiver of the two-year home country requirement of the exchange visitor program. The length of the statement may vary;
- Copies of all DS-2019 "Exchange Visitor Program Certificate Of Eligibility For Exchange Visitor (J-1) Status" (formerly IAP-66) forms;
- Notice of Entry of Appearance as Attorney or Representative (G-28 form), if the exchange visitor is represented by an attorney;
- 6. Copy of the data page of the exchange visitor's current passport containing name and birth date.
- 7. Two self-addressed, stamped envelopes.

Once your application has been processed, you will receive your case number and further instructions on how to proceed. <u>Please do not call to verify that the application has arrived</u>. Current processing times are listed on the U.S. Department of State web site, www.travel.state.gov.

Paperwork Reduction Act (PRA) Statement

Public reporting burden for this collection of information is estimated to average 1 hour per response, including time required for searching existing data sources, gathering the necessary documentation, providing the information and/or documents required, and reviewing the final collection. You do not have to supply this information unless this collection displays a currently valid OMB control number. If you have comments on the accuracy of this burden estimate and/or recommendations for reducing it, please send them to: AVISS/DIR, ROOM 2400 SA2 2, U.S. Department of State, Washington, DC 2052-02-03.

DS-3035 10-2004

Instruction Page 1 of 1



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U.S. Department of State J-1 VISA WAIVER RECOMMENDATION APPLICATION ESTIMATED BURDEN: 1 Hour.

OMB No. 1405-0135 EXPIRATION DATE: 07/31/2011

TYPE OR PRINT YOUR ANSWERS IN THE SPACE PROVIDED. YOU MAY APPEND ADDITIONAL PAGES IN ORDER TO FULLY RESPOND TO THE QUESTIONS									
1. Title Surname (As in Passport) Dr. Mr. Mas. Mas. Sample									
Given Names (As in Passport, First & Middle) Maiden Name (if any)									
Maria Test Please indicate any other names that you are, or have been, known by. These can include aliases, previous married names, religious names,									
professional names, etc.	that you are, o	or have been,	, known by.	These o	an include alias	es, previo	ous married nan	nes, re	eligious names,
Other Surname(s)				Other G	iven Name(s)				
	ate of Birth <i>(mn</i>	nm-dd-yyyy)							
	B-22-1980								
4. Country Information (As sh			S-2019/form						
City of Birth test	Country of TAJIKIS	Eirth TAN		Citizensh TAJIKI	ip Country STAN		TAJIKISTA)	ent Re N	sidence Country
5. I am requesting a recomme	ndation for a w	aiver of the 2	212(e) requi	rement ba					
☐ Exceptional Hardship		_	Persecution		-	_		-	ncy (Physician)
☐ Interested Government A	gency (non-phy	rsician)	State Heal	th Agenc	y Request	No Obj	ection Stateme	ent	
Did your exchange visitor p organization? No	rogram(s) inclu	le U.S. Gove	ernment fund	ds, funds	from your own	governm	ent or funds fro	om an	international
7. Current address of exchang	e visitor								
Street 123 Main St	City Springf:	le1d		State/Pr VIRGII		Zip/Post 22132	tal Code	Cour	ntry (if not U.S.)
Home Phone	Business Phon	•	Fax			Email A	ddress		
8. Last U.S. city and state, if	not currently liv	ing in U.S.:							
City Springfield			State VIRG:	INIA					
Are you represented by an (If yes, please enter the following)									
Attorney, Representative, and/o / Attorney Inc.	r Organization	Name							
Street City State Zip 456789 Main St Springfield VIRGINIA 22132			32						
		-							
Business Phone/Ext.		Fax				Email A	ddress		
If this form is being prepared by an attorney, the attorney must sign here:									
10. Mailing address of exchange visitor (If different from your current or attorney address)									
Street	City			State/Province Zip		Zip/Post	Zip/Postal Code C		ntry (if not U.S.)
11. I request that all correspondence, including my recommendation, be sent to my: (check only OVE)									
12. List all exchange visitor programs in which you participated, beginning with the first program									
SEVIS Number Program Number Purpose of the Form Begin Date End Date Subject/Field Code Funding Amount									
(mmm-delessas) (mmm-delessas)					\$12345.00				
					l				

Page 1 of 2

Page 5 of Packet

13. Is there any period of time in the U.S. that is not covered by your form DS-2019/formerly IAP-66? ☐ Yes No (If yes please explain below)						
14. Does this emplication	include any .1-2 depend	ents? □ Yes ☑ No #	f var planta antar information	about these J-2 dependents below)		
Surname	Given name	Date of Birth (mmm-dd-yyy		Relationship		
15. Is your spouse in J-1		. , .	must apply separately for a wi			
16. If your spouse has ap	plied for a waiver, plea:	se enter information about	his/her J waiver case below:			
Surname	Given name	Date of Birth (mmm-dd-yyy		J Waiver Case Number		
J-1 visa was used to		/ changed to J-1 visa stat		tion should refer to the first time the enter the date of status change,		
Date (mmm-dd-yyyy) JUN-27-1999	Port of Entry Miami	State of Entry FLORIDA		Issuing Post		
18. Alien Registration Number, if any: 19. I-94 Number:						
Α				_		
20. If you have ever applied for a J visa waiver recommendation or advisory opinion, please enter your most recent case number:						
21. I certify that I have read and understood all the questions set forth in this application and the enswers I have furnished are true and correct to the best of my knowledge and belief. I understand that any false or misleading statement may result in the refusal of a waiver recommendation.						
Signature of Exchange Visitor: Date (mmm-old-yyyy) OCT-24-2008						

DO NOT WRITE BELOW THIS SPACE - FOR OFFICE USE ONLY						
Case No: 874137 Date Rec.: Fee Paid: G-28:						
	•	•				

DS-3035 Page 2 of 2



Page 6 of Packet

```
Supplementary Applicant Information Page (1 of 2)
        Case Number: 874137
        Request Type: No Objection
   Applicant Information -
                              Surname (Last): Sample
                 Given Name (First/Middle): Maria
                               Maiden Name: Test
Gender: female
                                Date of Birth: 02/22/1980
     Date of Birth: 02721980
City of Birth: TAJIKISTAN
Country of Birth: TAJIKISTAN
Citizenkinj Country: TAJIKISTAN
Country of Legal Permanent Residence: TAJIKISTAN
Alien Regittration Number:
1-94 Departure Number:
   Other Names (Aliases)
                          Given Name (First/Middle)
                                                                    Surname (Last)
   Other Name 1:
Other Name 2:
   Other Name 3:
   Contact Information
               Current
                                                                    Mailing
                                                                                            Mailing Preference: ( ) Mailing Address
                                                                                                                  Current Address
  Address 1: 123 Main St
                                                                                                                  ( ) Attorney Address
  Address 2:
Address 3:
                                                                                         Most Recent City/State:
                                                                                            Springfield, VIRGINIA
        City: Springfield
   Province:
State: VIRGINIA
Country: UNITED STATES OF AMERICA
Zip Code: 22132
Postal Code:
   Phone Number(s)
   Location
                 Number
                                            Extension
                                                                     Type
Home
Business
   Email Information
      Email Address:
   Attorney Information -
      Law Firm or Organization Name: Attorney Inc.
   Name of Attorney or Representative:
                              Address 1: 456789 Main St
                              Address 2
                              Address 3
                                   City: Springfield
State: VIRGINIA
                               Zip Code: 22132
                                 Phone:
Fax:
                         Email Address:
```



Page 7 of Packet

Supplementary Applicant Information Page (2 of 2)

Case Number: 874137 Name: Mrs. Maria Sample Request Type: No Objection

Visa History -

Entry Date of First J-1 Visa: 06/27/1999 Entry Port of First J-1 Visa: Miami Entry State of First J-1 Visa: FLORIDA Issuing Post of First J-1 Visa:

Program Information

 SEYIS ID
 Program (Multipul)
 Purpose
 Regin Date
 End Date
 Subject Field Funding Code
 Amount

 n000000000
 P-1-12345
 Follow To Join
 12/20/2000
 12/20/2000
 12/20/2001
 12/20/2001
 12/20/2001
 12/20/2001

Dependent Information -

Given Name Surname Date of Birth Country of Birth Relationship Status

Spouse Case Number:

Explanation for any period of time in the U.S. not covered DS-2019 (formerly IAP-66).



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STATEMENT OF REASON

RE: 874137, Sample, Maria, 02/22/1980, COB: TAJIKISTAN, COR: TAJIKISTAN

October 24, 2008

Because this is a test application



Page 9 of Packet

THIRD PARTY BARCODE PAGE

Case Number: 874137
Applicant Name: Maria Sample
Applicant DOB: 02/22/1980
Applicant COB: TAJJKISTAN
Waiver Basis: No Objection



TO THE EXCHANGE VISITOR'S EMBASSY.

 Please return this page (the Third Party Barcode Page) and the documents listed below to the Department of State at the address below:

> U.S Department of State CA/VO/L/W, Visa Services 2401 E Street, NW, (SA-1) Washington, DC 20522-0106

2) The "no objection" statement requested by the exchange visitor must state that the visitor's government has no objection to the applicant a)not returning to the home country to satisfy the two-year foreign residence

requirement and

b) remaining in the U.S. if he or she chooses.

The "no objection" statement must be on Embassy letterhead and stationery. It must be sent directly from the Embassy in Washington, DC.

When the "no objection" statement originates from the exchange visitor's government in the home country, that government must forward it directly to the American Consulate, which in turn will transmit the statement to the Waiver Review Division, Visa Services.

Please print the waiver applicant's case file number on both the statement and on the LOWER RIGHT of the envelope. Not including this information could result in correspondence being microuted and may delay the processing of the application.

