




DS-3035 Form for OMB Submission

J Visa Waiver Online (JWOL)
User Interface Design
November 11, 2011

Login to Account



U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

J Visa Waiver Online

Welcome!

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 to request a waiver of 212(e) residence requirement, enter a case number and begin the paperwork for their request to the Department of State Waiver Review Division for a waiver recommendation. For more information, visit www.travel.state.gov.


[Click here](#) to find out if you are subject to the two-year foreign residence requirement of Section 212(e) of the Immigration and Nationality Act.

Sign In

Email Address


Password

Enter the code as shown




Check Application Status

Enter Case Number

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Forgot Password



Manage Account | Sign Out


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CONSULAR ELECTRONIC APPLICATION CENTER

J Visa Waiver Online

Forgot Password

Enter the email address associated with your account and the characters in the picture below and click Continue.

<p>Email Address <input type="text"/></p> <p>Enter the code as shown: <input type="text"/></p> <p> </p> <p><input type="button" value="Continue"/> <input type="button" value="Cancel"/></p>	<p>Help: Forgot Password</p> <p>Help text...</p>
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Change Password

Manage Account ▶ | Sign Out



U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

J Visa Waiver Online

Change Password

Passwords must be a minimum of 12 characters in length. It must be a combination of at least three of the following four groups from the standard keyboard:

1. Upper case letters (A-Z)
2. Lower case letters (a-z)
3. Arabic numerals (0-9)
4. Non-alphanumeric characters (such as !, \$, #, %)

Password

New Password

Confirm New Password

[Help: Password Change](#)

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Create New Account

Manage Account | Sign Out

 U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

J Visa Waiver Online

Create Account

Please enter the following information to create your account.

Email Address

Select a Security Question
- Select one -

Answer

Enter the code as shown:

Help: Security Question


When retrieving your application, you will need to enter the answer exactly as you submit it on this page.

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Create Applicant Profile

Displayed if Waiver Applicant selected

[Manage Account](#) | [Sign Out](#)

**U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEE **SUMMARY** **COMPLETE** REVIEW SIGN

J Visa Waiver Online

OMB CONTROL NUMBER: 1405-0135
FORM NUMBER: DS-3035
EXPIRATION DATE: 9/31/2014
ESTIMATED BURDEN: 1 Hour

Profile Information

Please complete the following information.

I am the

Waiver Applicant

Attorney / Representative

Personal Information

Title
- SELECT ONE -

Surnames

(e.g., FERNANDEZ GARCIA)

Given Names

(e.g., JUAN MIGUEL)

Q: Have you ever used other names (i.e., religious, professional, alias, etc.)?
A: Yes No

Sex
 Male Female

Date of Birth
 - -
(Format: DD-MMM-YYYY)

City of Birth

Place of Birth
- SELECT ONE -

Citizenship Country
- SELECT ONE -

Country of Legal Permanent Residence
- SELECT ONE -

Current Address

Street Address (Line 1)

Street Address (Line 2) Optional

City

State
- SELECT ONE - Does Not Apply

Postal Zone/ZIP Code
 Does Not Apply

Country
- SELECT ONE -

Phone
Primary Phone Number

Email
Email Address
 Does Not Apply

Public reporting burden for this collection of information is estimated to average 50 minutes 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: A/ISS/DIR, Room 2400 SA-22, U.S. Department of State, Washington, DC 20522-2202

INA Section 222(f) provides that the records of the Department of States and of diplomatic and consular offices of the United States pertaining to the issuance and refusal of visas or permits to enter the United States shall be considered confidential and shall be used only for the formulation, amendment, administration, or enforcement of the immigration, nationality, and other laws of the United States. Certified copies of such records may be made available to a court provided the court certifies that the information contained in such records is needed in a case pending before the court.


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Create Applicant Profile (cont.)

Displayed if user indicates they have used other names

Manage Account | Sign Out

**U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

OMB CONTROL NUMBER: 1405-0135
FORM NUMBER: DS-3035
EXPIRATION DATE: 8/31/2014
ESTIMATED BURDEN: 1 Hour

Profile Information

Please complete the following information.

I am the

Waiver Applicant
 Attorney / Representative

Personal Information

Title
- SELECT ONE -

Surnames

(e.g., FERNANDEZ GARCIA)

Given Names

(e.g., JUAN MIGUEL)

Q: Have you ever used other names (i.e., religious, professional, alias, etc.)?
A: Yes No

Provide the following information:

Surname

Given Name

[+ Add Another](#) [- Remove](#)

Sex
 Male Female

Date of Birth
 / /
(Format: DD-MMM-YYYY)

City of Birth

Place of Birth
- SELECT ONE -

Citizenship Country
- SELECT ONE -

Country of Legal Permanent Residence
- SELECT ONE -

Current Address

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State
- SELECT ONE - Does Not Apply

Postal Zone/ZIP Code
 Does Not Apply

Country
- SELECT ONE -


Phone
Primary Phone Number

Email
Email Address
 Does Not Apply

Public reporting burden for this collection of information is estimated to average 60 minutes 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: **A/ISS/DIR, Room 2400 SA-22, U.S. Department of State, Washington, DC 20522-2202**

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Create Attorney Profile

Displayed if Attorney/Representative selected

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**U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEE | SUMMARY | COMPLETE | REVIEW | SIGN

J Visa Waiver Online

OMB CONTROL NUMBER: 1405-0135
FORM NUMBER: DS-3035
EXPIRATION DATE: 8/31/2014
ESTIMATED BURDEN: 1 Hour

Profile Information

Please complete the following information.

I am the

Waiver Applicant

Attorney / Representative

Attorney Information

ATTENTION: Please note that all the information used to create an attorney account in your name or your Firm/Organization's name will be viewable by any individual who creates an individual account. Further, the display of this information will allow the waiver applicant to select you as their legal representative to assist them during their waiver process. You should not create an account if you do not wish to have your information viewable.

Law Firm or Organization Name

Surnames

Given Names

Primary Phone Number

Secondary Phone Number

Does Not Apply

Fax Number

Does Not Apply

Email Address

Does Not Apply

Current Address

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State

Does Not Apply

Postal Zone/ZIP Code


Does Not Apply

Country

Public reporting burden for this collection of information is estimated to average 60 minutes 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: **A/ISS/DIR, Room 2400 SA-22, U.S. Department of State, Washington, DC 20522-2202**

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Summary Page

Appears for All Users



Manage Account | Sign Out

U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

J Visa Waiver Online

Summary

What would you like to do?

-  [Create New Application](#)
Complete an online application for a J-1 waiver recommendation.
-  [Request an Advisory Opinion](#)
Request an advisory opinion.

John, Doe		Address Change Notification		
Application No.	Basis Selection	Submitted	Status	Fee Status
AA0000001	No Objection	1/1/00 12:00:00 AM	In Progress	In Progress
AA0000002	No Objection	1/17/2011 12:00:00 AM	Submitted	In Progress

Jane, Doe		Address Change Notification		
Application No.	Basis Selection	Submitted	Status	Fee Status
AA0000001	No Objection	1/1/00 12:00:00 AM	In Progress	In Progress
AA0000002	No Objection	1/17/2011 12:00:00 AM	Submitted	In Progress


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Creating a New Application

The screenshot displays the CEAC interface for a J Visa Waiver Online application. At the top, the U.S. Department of State logo and navigation links for 'Manage Account' and 'Sign Out' are visible. The main navigation bar includes 'FEE', 'SUMMARY', 'COMPLETE' (highlighted), 'REVIEW', and 'SIGN'. The left sidebar contains a list of application steps: 'Exchange Visitor Info', 'Attorney', 'Address and Phone', 'Waiver Basis', 'Program / Non-Program', 'J2', and 'J Visa / Status Information'. The main content area is titled 'Exchange Visitor Information' and includes a dropdown menu for 'Select an Applicant' currently set to '- SELECT ONE -'. To the right, OMB control and form information is provided: OMB CONTROL NUMBER: 1405-0135, FORM NUMBER: DS-3035, EXPIRATION DATE: 8/31/2014, and ESTIMATED BURDEN: 1 Hour. A 'Help: Personal Information' section contains placeholder text. Below this, a public reporting burden notice states that the average response time is 60 minutes and provides contact information for A/ISS/DIR, Room 2400 SA-22, U.S. Department of State, Washington, DC 20522-2202. A disclaimer regarding the confidentiality of records under INA Section 222(f) is also present. At the bottom of the main content area are 'Back', 'Save', and 'Next' buttons. The footer contains a disclaimer, a copyright notice, and links to 'Disclaimer' and 'Paperwork Reduction' pages.

Exchange Visitor Information Page

[Manage Account](#) | [Sign Out](#)

**U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEE | SUMMARY | **COMPLETE** | REVIEW | SIGN

J Visa Waiver Online

OMB CONTROL NUMBER: 1405-0135
FORM NUMBER: DS-3035
EXPIRATION DATE: 8/31/2014
ESTIMATED BURDEN: 1 Hour

Exchange Visitor Information

- ✓ Exchange Visitor Info
- ✓ Attorney
- ✓ Address and Phone
- ✓ Waiver Basis
- ✓ Program / Non-Program
- ✓ J2
- ✓ J Visa / Status Information

Help: Navigation Buttons

Click on the buttons above to access previously entered data.

Select an Applicant
NEW APPLICANT...

Enter this information as found on the exchange visitor's passport.

Title
- SELECT ONE -

Surnames

(e.g., FERNANDEZ GARCIA)

Given Names

(e.g., JUAN MIGUEL)

Maiden Name

Q: Have you ever used other names (i.e., religious, professional, alias, etc.)?
A: Yes No

Sex
 Male Female

Date of Birth

(Format: DD-MMM-YYYY)

City of Birth

Place of Birth
- SELECT ONE -

Citizenship Country
- SELECT ONE -

Country of Legal Permanent Residence
- SELECT ONE -


Help: Personal Information
Some help text...Some help text...Some help text...Some help

Help: Surnames
Enter all surnames as listed in your passport. If only one name is

Help: Given Names
If your passport does not include a given name, please enter

Help: Place of Birth
Select the name that is currently in use for the place where you were

← Back | Save | Next →




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Exchange Visitor Information Page

Displays if user indicates other names were used

[Manage Account](#) | [Sign Out](#)

**U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

[FEE](#) | [SUMMARY](#) | [COMPLETE](#) | [REVIEW](#) | [SIGN](#)

J Visa Waiver Online

OMB CONTROL NUMBER: 1405-0135
FORM NUMBER: DS-3035
EXPIRATION DATE: 8/31/2014
ESTIMATED BURDEN: 1 Hour

Exchange Visitor Information

- Exchange Visitor Info
- Attorney
- Address and Phone
- Waiver Basis
- Program / Non-Program
- J2
- J Visa / Status Information

Help: Navigation Buttons

Click on the buttons above to access previously entered data.

Select an Applicant
NEW APPLICANT...

Enter this information as found on the exchange visitor's passport.

Title
- SELECT ONE -

Surnames

(e.g., FERNANDEZ GARCIA)

Given Names

(e.g., JUAN MIGUEL)

Maiden Name

Q: Have you ever used other names (i.e., religious, professional, alias, etc.)?
A: Yes No

Provide the following information:

Other Surnames Used (religious, professional, aliases, etc.)

Other Given Names Used

[Add Another](#) | [Remove](#)

Sex
 Male Female

Date of Birth
/ /
(Format: DD-MMM-YYYY)

City of Birth

Place of Birth
- SELECT ONE -

Citizenship Country
- SELECT ONE -

Country of Legal Permanent Residence
- SELECT ONE -

Public reporting burden for this collection of information is estimated to average 60 minutes 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: **A/ISS/DIR, Room 2400 SA-22, U.S. Department of State, Washington, DC 20522-2202**

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[Back](#) | [Save](#) | [Next](#)

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Attorney Information Page

Manage Account | Sign Out

 U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Attorney Information

Are you represented by an attorney or other organization?

Yes No

[Back](#) [Save](#) [Next](#)

Help: Navigation Buttons

Click on the buttons above to access previously entered data.

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Attorney Information Page (cont.)

Displayed if user indicates they are represented by an attorney or other organization


The screenshot shows the CEAC interface for a J Visa Waiver Online application. The top navigation bar includes 'Manage Account' and 'Sign Out'. The main header displays the U.S. Department of State logo and 'CONSULAR ELECTRONIC APPLICATION CENTER'. Below the header, a progress bar shows 'FEE', 'SUMMARY', 'COMPLETE', 'REVIEW', and 'SIGN'. The left sidebar contains navigation buttons for 'Exchange Visitor Info', 'Attorney', 'Address and Phone', 'Waiver Basis', 'Program / Non-Program', 'J2', and 'J Visa / Status Information'. The main content area is titled 'J Visa Waiver Online' and shows 'WAIVER APPLICANT: Sample, Maria' and 'CASE NUMBER: 800001'. The 'Attorney Information' section asks 'Are you represented by an attorney or other organization?' with 'Yes' selected. Below this, a search box prompts the user to enter 'Law Firm or Organization Name', 'Surnames of Attorney or Representative', 'Given Names of Attorney or Representative', and 'Email Address'. A 'Search' button is provided. At the bottom of the form are 'Back', 'Save', and 'Next' buttons. A footer contains a disclaimer and links for 'Copyright', 'Disclaimer', and 'Paperwork Reduction'.

- The user must enter information in one or more fields to initiate the search.
- The attorney must already be registered.

Attorney Information Page (cont.)

G-28 question displayed after user selects an attorney/representative

Manage Account | Sign Out

 **U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEE **SUMMARY** **COMPLETE** REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Attorney Information

Are you represented by an attorney or other organization?
 Yes No

Please use the following fields to search for the attorney or organization:

Law Firm or Organization Name

Surnames of Attorney or Representative

Given Names of Attorney or Representative

Email Address


Search

Selected	Smith, John Smith and Jones Attorney at Law 123 Anywhere Street jsmith@yahoo.com
----------	---

Is there a G-28 stating this information?
 Yes No


Note: If an exchange visitor has an attorney, U.S.C.I.S. will require a form G-28.

Back **Save** **Next**

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Address and Phone Page

[Manage Account](#) | [Sign Out](#)

**U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEE | SUMMARY | **COMPLETE** | REVIEW | SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Address and Phone

Current Address

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State

Does Not Apply

Postal Zone/ZIP Code

Does Not Apply

Country

Phone

Primary Phone Number

Secondary Phone Number
 Does Not Apply

Business Phone Number
 Does Not Apply

Fax Number
 Does Not Apply

Email Address
 Does Not Apply


Please indicate where you would like the Waiver Review Division to send correspondence, including the recommendation:

Current Address

Attorney's Address

Other mailing address (if different from current or attorney address)

← Back | Save | Next →




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Address and Phone Page (cont.)

Displays if current address is not in U.S.

[Manage Account](#) | [Sign Out](#)

**U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEESUMMARYCOMPLETEREVIEWSIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Address and Phone

Current Address

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State
- SELECT ONE -
 Does Not Apply

Postal Zone/ZIP Code

 Does Not Apply

Country
ANTIGUA AND BARBUDA

Please enter the most recent U.S. city and state where you lived.

U.S. City

U.S. State
- SELECT ONE -

Phone

Primary Phone Number

Secondary Phone Number
 Does Not Apply

Business Phone Number
 Does Not Apply

Fax Number
 Does Not Apply

Email Address
 Does Not Apply


Please indicate where you would like the Waiver Review Division to send correspondence, including the recommendation:

Current Address

Attorney's Address

Other mailing address (if different from current or attorney address)


← BackSaveNext →

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Address and Phone Page (cont.)

Displays if another mailing address for correspondence is selected

Manage Account | Sign Out

**U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEESUMMARYCOMPLETEREVIEWSIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Address and Phone

Current Address

Street Address (Line 1)

Street Address (Line 2) *Optional

City

State
- SELECT ONE -
 Does Not Apply

Postal Zone/ZIP Code

 Does Not Apply

Country
- SELECT ONE -

Phone

Primary Phone Number

Secondary Phone Number
 Does Not Apply

Business Phone Number
 Does Not Apply

Fax Number
 Does Not Apply

Email Address
 Does Not Apply

Please indicate where you would like the Waiver Review Division to send correspondence, including the recommendation:

Current Address
 Attorney's Address
 Other mailing address (if different from current or attorney address)

Street Address (Line 1)

Street Address (Line 2) *Optional

City


State
- SELECT ONE -
 Does Not Apply

Postal Zone/ZIP Code

 Does Not Apply

Country
- SELECT ONE -

← Back Save Next →

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Waiver Basis Page

Displayed for all users

Manage Account ▶ | Sign Out

 **U.S. DEPARTMENT of STATE**
CONSULAR ELECTRONIC APPLICATION CENTER

FEE **SUMMARY** **COMPLETE** REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Waiver Basis

Please read the following information carefully to determine the basis on which test test is applying.

- No objection statement from the home government
- Request by a State Health Agency
- Request by an Interested (U.S.) Government Agency (IGA)
- Other
- Request by an Interested (U.S.) Government Agency (IGA) Physician
- Exceptional hardship to a United States citizen's (or permanent resident) spouse or child of exchange visitor
- Persecution

◀ Back Save Next ▶

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Waiver Basis Page

Displays if No objection from home government selected

U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

Manage Account | Sign Out

FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Waiver Basis

Please read the following information carefully to determine the basis on which test test is applying.

No objection statement from the home government

Please explain why you want to waive your two-year home residence requirement.

Request by a State Health Agency

Request by an Interested (U.S.) Government Agency (IGA) Other

Request by an Interested (U.S.) Government Agency (IGA) Physician

Exceptional hardship to a United States citizen's (or permanent resident) spouse or child of exchange visitor

Persecution

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The user must enter why they want to waive the two-year residence requirement.

Waiver Basis Page

Displays if Request by State Health Agency selected

U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

Manage Account | Sign Out

FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Waiver Basis

Please read the following information carefully to determine the basis on which test test is applying.

- No objection statement from the home government
- Request by a State Health Agency

Has the exchange visitor's government funded any portion of his/her program while under a "J" visa?

Yes No

The physician who received funding from their home country government must submit a statement of no objection with the Conrad/State Department of Health Waiver. Click [here](#) more information:

- Request by an Interested (U.S.) Government Agency (IGA) Other
- Request by an Interested (U.S.) Government Agency (IGA) Physician
- Exceptional hardship to a United States citizen's (or permanent resident) spouse or child of exchange visitor
- Persecution

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- The user must indicate if the exchange visitor's government funded any portion of his/her program while under the "J" visa.
- If Yes, the user is instructed to submit a statement of no objection with the Conrad/State Department of Health Waiver.

Waiver Basis Page

Displays if Persecution selected

U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

Manage Account | Sign Out

FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Waiver Basis

Please read the following information carefully to determine the basis on which test test is applying.

- No objection statement from the home government
- Request by a State Health Agency
- Request by an Interested (U.S.) Government Agency (IGA) Other
- Request by an Interested (U.S.) Government Agency (IGA) Physician
- Exceptional hardship to a United States citizen's (or permanent resident) spouse or child of exchange visitor
- Persecution

Explain:

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The user must enter why they want to waive the two-year residence requirement.

Program/Non-Program Page

U.S. DEPARTMENT of STATE
CONSULAR ELECTRONIC APPLICATION CENTER

Manage Account | Sign Out

FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Program / Non-Program

A new row must be added for EACH form DS-2019 (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 letter indicating the information requested below.

SEVIS Number

Program Number
P - -

Purpose of the Form
-- SELECT ONE --

Begin Date End Date
(Format: DD-MMM-YYYY) (Format: DD-MMM-YYYY)

Subject/Field Code Funding Amount

[Add Another](#) [Remove](#)

Did any of your exchange visitor program(s) include U.S. Government funds, funds from your own government or funds from an international organization?
 Yes No

Is there any period of time in the U.S. that is not covered by a form DS-2019 (formerly IAP-66)?
 Yes No

[Back](#) [Save](#) [Next](#)

Help: Sample Links
Click on the links below to show the different versions of the forms you may have in hand.
[DS-2019\(new\)](#)
[DS-2019\(old\)](#)
[IAP-66](#)

Help: IAP-66
When program approval was on IAP-66: enter N0000000000 (must

Help: IAP-66
Enter the following from the IAP-66 form for the Subject/Field Code: 00.

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The user must enter the following information:

- SEVIS Number
- Program Number
- Purpose of the Form
- Begin Date (DD-MMM-YYYY)
- End Date (DD-MMM-YYYY)
- Subject/Field Code
- Funding Amount

Program/Non-Program Page (cont.)

Answers Yes to "Is there any period of time in the U.S. that is not covered by a DS-2019 or IAP-66 form?"

The screenshot shows the 'Program / Non-Program' section of the CEAC application. The page title is 'J Visa Waiver Online' and the waiver applicant is 'Sample, Maria' with case number '800001'. The 'COMPLETE' step is highlighted in the navigation bar. The left sidebar contains navigation buttons for 'Exchange Visitor Info', 'Attorney', 'Address and Phone', 'Waiver Basis', 'Program / Non-Program', 'J2', and 'J Visa / Status Information'. The main content area includes a 'Help: Navigation Buttons' section and a 'Help: Sample Links' section. The 'Program / Non-Program' form fields are: SEVIS Number (text input), Program Number (dropdown menu with 'P' selected), Purpose of the Form (dropdown menu with '-- SELECT ONE --'), Begin Date and End Date (date pickers), Subject/Field Code (text input), and Funding Amount (text input). Below the form are 'Add Another' and 'Remove' buttons. A question asks if any exchange visitor program(s) include U.S. Government funds, with radio buttons for 'Yes' and 'No'. Another question asks if there is any period of time in the U.S. not covered by a DS-2019 (formerly IAP-66) form, with radio buttons for 'Yes' and 'No'. An 'Explain:' text area is provided for the user to enter an explanation. At the bottom are 'Back', 'Save', and 'Next' buttons. The footer contains a disclaimer and links for Copyright, Disclaimer, and Paperwork Reduction.

The user must enter an explanation if there was any period of time in the U.S. that was not covered by a form DS-2019 (formerly IAP-66).

J-2 Information Page

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FEE **SUMMARY** **COMPLETE** REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

J-2 Information

Does this application include J-2 dependents?
 Yes No

Is your spouse in J-1 status?
 Yes No

[◀ Back](#) [Save](#) [Next ▶](#)

Help: Navigation Buttons

Click on the buttons above to access previously entered data.

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J-2 Information Page

Answers Yes to J-2 dependents and spouse in J-1 status

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FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

J-2 Information

Does this application include J-2 dependents?
 Yes No

Enter information about your J-2 dependent(s):

Surname
Given Names
Date of Birth
(Format: DD-MMM-YYYY)
Country of Birth
- SELECT ONE -
Relationship
- SELECT ONE -
Add Another Remove

Is your spouse in J-1 status?
 Yes No

Enter information about the J waiver case below:

Surname
Given Names
Date of Birth
(Format: DD-MMM-YYYY)
Country of Birth
- SELECT ONE -
J Waiver Case Number

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- For J-2 dependents, enter the Surname, Given Name, Date of Birth, Country of Birth and Relationship
- If spouse in J-1 status, enter the Surname, Given Name, Date of Birth, Country of Birth and J Waiver Case Number

J Visa/Status Information Page

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FEE **SUMMARY** **COMPLETE** REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

J Visa / Status Information

Did you originally enter the U.S. on a J-1 visa?
 Yes No

Do you have an Alien Registration Number?
 Yes No

Do you have an I-94 Number?
 Yes No

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Help: Navigation Buttons

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J Visa/Status Information Page (cont.)

Answers Yes to all questions

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FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

J Visa / Status Information

Did you originally enter the U.S. on a J-1 visa?
 Yes No

Date of Entry
[] [] []
(Format: DD-MMM-YYYY)

Port of Entry
-- SELECT ONE --

Issuing Post
- SELECT ONE -

Do you have an Alien Registration Number?
 Yes No

Alien Registration Number ('A' number)
[]

Do you have an I-94 Number?
 Yes No

I-94 Number (no spaces)
[]

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- The user must enter the date of entry, select Port of Entry from the drop-down list and select the Issuing Post from the drop-down list.
- The user must enter the Alien Registration Number and I-94 Number.

J Visa/Status Information Page (cont.)

Answers No to all questions

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FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

J Visa / Status Information

Did you originally enter the U.S. on a J-1 visa?
 Yes No

Date of Status Change
[] [] []
(Format: DD-MMM-YYYY)

Original Visa Type
- SELECT ONE -

New I-94 Number
[]

Control Number
[]

Issuing Post of Visa
- SELECT ONE -

Please explain why your status changed.
[]

Do you have an Alien Registration Number?
 Yes No

Do you have an I-94 Number?
 Yes No


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The user must enter the Date of Status Change, Original Visa Type, New I-94 Number, Control Number, Issuing Post of the Visa and explain why their status changed.

Sign and Submit Page

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CONSULAR ELECTRONIC APPLICATION CENTER

FEE | **SUMMARY** | COMPLETE | REVIEW | SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, Maria
CASE NUMBER: 800001

Sign and Submit

Read the following information carefully before electronically signing and submitting the application.

Your application is now ready to be submitted. Please note that this does not necessarily mean that your application for a nonimmigrant visa is complete as additional information may be needed after Department of State personnel have reviewed the application.

By clicking "Sign and Submit Application" you are electronically signing the application. You are required to electronically sign your application yourself, unless otherwise exempt by regulation. Even if the application has been prepared by someone other than yourself. Your electronic signature verifies that you have read and understood the questions in this application and that your answers are true and correct to the best of your knowledge and belief. The submission of an application containing any false or misleading statements may result in the permanent refusal of a visa or the denial of entry into the United States. All declarations made in this application are unsworn declarations made under penalty of perjury (U.S.C. 1746).

The information that you have provided in your application and other information submitted with your application may be accessible to other government agencies having statutory or other lawful authority to use such information, including for law enforcement and immigration law enforcement purposes. The photograph that you provide with your application may be used for employment verification or other U.S. law purposes.

Wednesday, November 02, 2011 - 2:21:59 PM EST

Preparer

Q: Did anyone assist you in filling out this application?

A: Yes No


E-Signature

I certify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.


Enter your Date of Birth

(Format: DD-MMM-YYYY)

Enter the code as shown



Click the button below to electronically sign your application

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Sign and Submit Page (cont.)

Answers Yes to "Did someone assist you in filling out this application?"

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FEE SUMMARY COMPLETE REVIEW SIGN

J Visa Waiver Online

WAIVER APPLICANT: Sample, M
CASE NUMBER: 1111111111

Sign and Submit

Read the following information carefully before dating, signing and submitting the application.

Your application is now ready to be submitted. Please note that this does not necessarily mean that your application for a nonimmigrant visa is complete as additional information may be needed after Department of State personnel have reviewed the application.

By clicking "Sign and Submit Application" you are electronically signing the application. You are required to electronically sign your application unless otherwise exempt by regulation, even if the application has been prepared by someone other than yourself. Your electronic signature certifies that you have read and understood the instructions in this application and that your answers are true and correct to the best of your knowledge and belief. The submission of an application containing a false or misleading statement may result in the permanent refusal of a visa or the denial of entry into the United States. All declarations made in this application are sworn declarations made under penalty of perjury. (28 U.S.C. 446).

The information provided in your application and other information submitted with your application may be accessible to other government agencies having statutory or other lawful authority to use such information, including for law enforcement and immigration law enforcement purposes. The photograph that you provide with your application may be used for employment verification or other U.S. law purposes.

Wednesday, November 02, 2011 - 2:25:36 PM EST

Preparer

Q: Did anyone assist you in filling out this application?

A: Yes No

Provide the following information

Preparer

Surnames

Given Names

Does Not Apply

Organization Name

Does Not Apply

Address

Street Address (Line 1)

Street Address (Line 2)

City

State/Province

Does Not Apply

Postal Zone/ZIP Code

Does Not Apply

Country

Relationship to You

E-Signature

I certify under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Enter your Date of Birth

(Format: DD-MMM-YYYY)

Enter the code as shown 

Click the button below to electronically sign your application

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MULTIMAX ARRAY
HITSS

OMB Submission for JWOL

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