



Delta Doctors Program

National Interest Waiver Review Checklist

Process Start Date:

Date Received:

Reviewer Date:

Copy of FCC's Letter File:

☐

Copy of Shipping Receipt:

☐

Emailed Attorney Letter:

☐

Tracking Number:

Physician's Name:

DOS Case Number:

DOB:

Current Address:

Country of Origin:

Specialty:

Worksite Name & Address:

MUA Number:

HPSA Number:

County/Parish:

**Provide additional worksites with MUA/HPSA numbers on a separate page.*

Attorney:

Firm Name:

Attorney Address:

Attorney Phone Number:

Attorney Fax Number:

Attorney Email:

Employer's Name:

Employer Contact:

Employer's Address:

Employer Phone Number:

Employer Fax Number:

Employer Email:

<input type="checkbox"/>	1	Letter of Opinion from Legal Representatives
<input type="checkbox"/>	2	Form G-28
<input type="checkbox"/>	3	Physician Statement
<input type="checkbox"/>	4	Copy of Executed Contract
	<input type="checkbox"/>	Signed/dated by Physician/Employer
	<input type="checkbox"/>	5 Year (NIW)
	<input type="checkbox"/>	40 Hours per week or 160 hours per month of direct patient care
	<input type="checkbox"/>	Service to Medicaid/Meidcare/Indigent Patients
	<input type="checkbox"/>	Base Salary: _____
	<input type="checkbox"/>	Name of each worksite and address
<input type="checkbox"/>	5	Copies of Diplomas, licenses or applications for licenses
	<input type="checkbox"/>	State medical license or applicaton for license
	<input type="checkbox"/>	USMLE Scores
<input type="checkbox"/>	6	Complete passport (Verify all pages)
	<input type="checkbox"/>	I-129 Immigration Petition Approval Notice
	<input type="checkbox"/>	H-1B Approval Notices
	<input type="checkbox"/>	Copy of I-94

Summary of Reviewer's Findings:



J-1 Visa Waiver Program

National Interest Waiver Letter of Support Requirements

Each national interest waiver packet must contain the items listed within the NIW checklist.

If documentation required in the checklist is omitted or does not meet the "Delta Doctors" Program Guidelines, the application will be mailed back to the attorney and will be placed in the back of the current applications that are in the DRA queue for review. The DRA checklist should be completed and included in the J-1 visa waiver application to the Authority.

- Send the original application and one copy directly to Delta Regional Authority.
- Place the U.S. Department of State Case Number on all pages.
- Tab the application by the numbers listed below in the following order.

DRA will make a decision on issuing a support letter upon receipt and review of the following:

Documents required for NIW support letter requested in conjunction with a J-1 waiver:

1. An executed employment contract between the physician and his/her employer, which commits the physician to five years of service in a DRA underserved county or parish.
2. A statement from the physician's employer committing support for the physician's NIW, which should be in the Employer Cover Letter.
3. A short testimonial from the physician expressing his/her reason for pursuing an NIW, which should be expressed in the physician statement.
4. A letter of opinion from a legal counsel stating "to the best of their knowledge, the information in the application is truthful, and that he/she believes the applicant is eligible for a NIW"; this should be stated in the original letter of opinion.

Documents required for NIW support letter requested after waiver has been granted:

1. An executed employment contract between the physician and his/her employer which commits the physician to two or more additional years of service in a DRA underserved county or parish. Self-employed physicians must present an affidavit committing him/her to two or more additional years of service.
2. A statement from the physician's employer committing support for the physician's NIW.
3. A short testimonial from the physician expressing his/her reason for pursuing an NIW.
4. A letter of opinion from a legal counsel stating "to the best of their knowledge the information in the application is truthful, and that he/she believes the applicant is eligible for a NIW."
5. Copies of diplomas, licenses, board certifications, and USMLE scores.
6. A copy of the physician's complete passport, I-129 Immigrant petition, H-1B approval notices and I-94.
7. A copy of Form G-28