

**J-1 EXCHANGE VISITOR VISA
NO PATIENT CARE OR CONTACT ATTESTATION
FOR INTERNATIONAL VISITORS WITH CLINICAL DEGREES (MD, DDS, BSN, ETC...)**

SEVIS J-1 Exchange Visitor Program Number: P-1-05941

This attestation certifies that the Exchange Visitor program in which Dr. [INSERT NAME OF EXCHANGE VISITOR PHYSICIAN, DENTIST, NURSE, ETC.: _____] is to be engaged is solely for the purpose of observation, non-clinical consultation, teaching, or research and that no element of patient care is involved.

22 CFR Section 62.27(c)(1)(i)

Name of Hosting Faculty Member: _____

Signature: _____ Date: _____

Name of Department Chair/Unit Director: _____

Signature: _____ Date: _____

Name of Dean: _____

Signature: _____ Date: _____

Name of J-1 Exchange Visitor Program Responsible Officer (RO) or Alternative RO in the Office of International Services:

Signature: _____ Date: _____