**Notice of Acknowledgement of Eligibilty Based on Current Visa status**

Acceptable Visas through UNIVERSITY MEDICAL RESIDENT SERVICES, P.C./UNIVERSITY DENTAL RESIDENT SERVICES, P.C.

**J-1 Visas**

J-1 visas are generally accepted for all medical resident/fellow training programs sponsored by the University at Buffalo.

**H-1B Visas**

H-1B visa holders may be accepted for medical foundational residency training programs and all fellowship training programs sponsored by the University at Buffalo. Approved foundational residency programs will have a combined, limited number cap of ten H-1B visas, based on institutional resources, and may be offered to exceptional residency candidates with approval of the DIO. H-1B visas are subject to USCIS regulations, laws and approvals. A resident or fellow may apply for an H-1B visa if they meet the below requirements:

1. Has passed USMLE steps 1, 2 and 3.
	* If Step 3 is not completed, then a J-1 Visa must be pursued.
2. The training program submits a letter of support for filing the H-1B visa.
3. The program director must fully support the H-1B Filing. If the program does not allow H-1B visas due to the possibility of delayed start dates, then the resident must pursue a J-1 Visa.

Approved foundational residency programs, for the combined, limited number cap of ten H-1B Visas, as referenced above are:

1. Internal Medicine- SUNY
2. Internal Medicine-  Catholic Health
3. Internal Medicine & Pediatrics Combined
4. Family Medicine
5. Pediatrics
6. Obstetrics & Gynecology-Catholic Health
7. General Surgery

A resident or fellow may convert from a J-1 to an H-1B Visa if:

1. Tied to a J-1 Waiver
2. The spouse of the resident or fellow is a recipient of a J-1 Waiver
3. The resident/fellow is a Canadian citizen who is unable to obtain a Statement of Need and plans on living in Canada and working in the United States. This is subject to changes in USCIS regulations, laws and approvals.
4. The resident/fellow has received a letter of support from the program director supporting the filing of an H-1B Visa and they are joining a fellowship program or one of the approved foundational residency programs; as listed above.

*Other Visas: T/N Visas are suitable for dental residents only who are participating in the UB Dental residency training program. F-1, STEM, OPT or extensions are not considered for medical or dental residency training programs. If matched on F-1 OPT, the resident is obligated to change category to J-1 as soon as possible prior to training program start date.*

I understand that my current Visa or immigration status does not meet the above requirements to be accepted into the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Training Program.

Therefore, I agree to apply for a J-1/H1-B within 30 days of acceptance of a conditional offer of employment.

IN WITNESS WHEREOF, the parties hereto have duly executed this Agreement as of the \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_.

Dated: \_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Resident/Fellow Signature)

I hereby certify to University Medical Resident Services, P.C./University Dental Resident Services, P.C. that the candidate identified in this Acknowledgement of Eligibilty form based on current Visa status has been advised of this requirement.

Dated: \_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Program Director Signature)

**NOT VALID WITHOUT BOTH SIGNATURES**