

Statement of Need Instructions for Ministry of Health Officials

Foreign national physicians seeking ECFMG J-1 visa sponsorship to engage in clinical programs of graduate medical education in the United States are required by federal regulation to secure a letter of need ("Statement of Need") from the Ministry of Health of the country of their most recent legal permanent residence.

Per the U.S. Code of Federal Regulations (CFR), the Statement of Need (SoN) must:

- Be issued by the **federal/central Ministry of Health office** of the applicant's country of most recent legal permanent residence
- Be issued on official Ministry of Health letterhead and addressed to ECFMG
- *Exactly* follow prescribed wording outlined in the CFR §62.27 (*see below*)
- Specify a need that exactly matches the name of the training specialty/subspecialty being pursued
- Contain the official stamp or seal of the issuing government *and* dated signature of issuing official on the SoN
- Be issued in English; if not issued in English, a certified word-for-word English translation is required (again, please note that the SoN and any translation must follow regulatory prescribed language)

Step 1 Place text below on official, federal/central Ministry of Health office letterhead:

Applicant (USMLE or MyIntealth) Identification Number: _____

Name of Applicant for Visa: _____

There currently exists in (name of country) a need for qualified medical practitioners in the specialty of _____.

(Name of applicant for visa) has filed a written assurance with the government of this country that they will return to this country upon completion of training in the United States and intends to enter the practice of medicine in the specialty for which training is being sought.

Step 2 Sign and date the SoN (please include your title).

Step 3 Place official Ministry of Health stamp or seal on letter.

IF SENDING VIA MAIL OR COURIER SERVICE:

Step 4 Place the letter in a Ministry of Health envelope and place a stamp over the sealed flap.

Step 5 Give the sealed envelope directly to the applicant OR mail it directly to ECFMG. The mailing address is:
EVSP/ECFMG, 3624 Market Street, Philadelphia, PA 19104, USA

Please note that each original SoN must be placed in a sealed Ministry of Health envelope and submitted to ECFMG. ECFMG will not accept SoNs that are not received in sealed envelopes. Copies of SoNs may be provided to applicants.

IF SENDING ELECTRONICALLY:

Step 4 Scan the SoN and save it as a PDF file

Step 5 E-mail the SoN PDF from an official and recognized Ministry of Health e-mail address to ECFMG at MoH@ecfm.org



Please see the ECFMG website at <https://www.ecfm.org/evsp/applying-general.html#need> for additional information.