No Objection J1 Visa Wavier Applicant Professional Summary

Application Date:

Last Name:

Middle Name:

First Name:

Maiden Name (s) if applicable:

Date of Birth:

Taxpayer Registration Number:

Nationality:

Employment History (*Teachers / Former Teachers – Jamaica Only*)

Please note that applicants who were employed as teachers must complete the required information

Name of School	Parish Location of the School	MOE Region	*Duration of Employment From - To*

Employment History (Non-Teachers – Jamaica Only)

Applicant´ who were not teachers are required to complete this section:

Place of Employment	Parish	Duration of Employment *From - To*

Educational Background

School Attended	Programme of Study	*Duration of Stud ies From - To*

Were you the recipient of a scholarship/student loan or any financial assistance while in Jamaica?

YES ☐ **NO** ☐

If Yes, please provide the specific details:

Were you the guarantor for a recipient of a scholarship/student loan or any other financial assistance while in Jamaica?

YES ☐ **NO** ☐

If Yes, Please provide the specific details:

Is this your 1st application for a J1 Visa (No Objection) Waiver? If No, please provide reason for re-applying:

DECLARATION STATEMENT:

I

Name of Applicant **declares that I have read the instructions and the information given on this application form is correct and true. I understand that any misleading or incorrect information provided will result in my application being delayed or denied.**

Please be advised that all information and documents obtained will be handled in accordance with the provisions of the Jamaica Data Protection Act, 2020. This ensures that personal data will be collected, processed, stored, and shared securely, lawfully, and transparently, with strict measures in place to protect individuals' privacy and rights. All data will be used solely for its intended purpose, maintained with the highest level of confidentiality, and safeguarded against unauthorized access, disclosure, or misuse.

Your signature below indicates your understanding of and consent to the above.

Applicant's Full Name:

Applicant's Signature & Date: