REQUIREMENTS FOR OBTAINING A STATEMENT OF NEED FROM THE GOVERNMENT OF CANADA FOR MEDICAL GRADUATES SEEKING POSTGRADUATE TRAINING IN THE UNITED STATES

For Postgraduate Medical Specialty Training Programs Commencing in 2004
Requirements for Obtaining a Statement of Need From the Government of Canada for Medical Graduates Seeking Postgraduate Training in the United States

For Postgraduate Medical Specialty Training Commencing in 2004

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2004 Requirements for Obtaining a Statement of Need from the Government of Canada

January 1, 2004

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Purpose of the Statement of Need

In accordance with United States legislation and Federal Regulations 22 CFR Part 62, foreign national physicians who are applying to the Educational Commission for Foreign Medical Graduates (ECFMG) for J-1 Visa sponsorship to attend accredited programs of graduate medical education must meet some federal requirements. One of the requirements is to provide a Statement of Need from the Ministry of Health of the country of their nationality or last legal permanent residence.

The J-1 Visa is issued by the Government of the United States, not Health Canada. Individuals generally apply to the U.S. Department of State for the J-1 Visa through U.S. embassies and consulates. To obtain information on eligibility requirements of the Immigration and Nationality Act as amended in 1976 (Public Law 94-484) including the United States requirement for a Statement of Need from the country of citizenship or legal permanent residence, individuals should contact the Educational Commission for Foreign Medical Graduates.

Exchange Visitor Sponsorship Program
Educational Commission for Foreign Medical Graduates
3624 Market Street
Philadelphia, Pennsylvania
U.S.A. 19104 - 2685
Telephone: (215) 823-2121
Web Site: www.ecfmg.org

The Government of Canada, through the federal Department of Health (Health Canada), issues Statements of Need based on existing recommendations of Canadian provincial and territorial jurisdictions. It is expected that applicants, who wish to pursue postgraduate medical education in the United States, will be training in medical specialties that have been identified in provincial or territorial physician resource plans, and that the physician will be returning to Canada to practice medicine.

1 These Requirements for Obtaining a Statement of Need from the Government of Canada are subject to change as they are reviewed annually by provincial and territorial governments and Health Canada. Applicants for a Statement of Need for clinical training programs commencing in 2004 are subject to the requirements described herein.
A list of identified medical specialties is available to applicants upon request. This list is revised annually and will be available at the beginning of each year. The information contained in the list is not a statement of policy nor an illustration of all physician resource needs in any province or territory. The information is solely for use by Health Canada in providing Statements of Need for Category B applications in support of postgraduate medical specialty training in the United States.

**Eligibility Criteria**
Canadian Citizenship or Permanent Residency in Canada.

**Change in “legal permanent residence”**
Applications for a Statement of Need from physicians who have prior J1 sponsorship from another country will be reviewed and assessed on a case-by-case, individual basis, and each application will be reviewed by the provincial-territorial committee. The application will be assessed on the following criteria.
(1) All requirements under Category B must be met.
(2) The applicant must demonstrate that he or she has no outstanding commitments of any kind to the other country. A letter from the original ministry of health of the previous sponsoring country that assures there is no objection to the applicant not returning to that country would satisfy this condition.
(3) All residents of Ontario must demonstrate evidence of prior residence in that province.

**Recruitment for Employment in Canada after Training**
At the end of this document is the form “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes.”

By signing this form, the physician permits Canadian provincial and territorial health authorities to initiate the process of recruitment for employment in Canada after completion of postgraduate medical training in the United States. The physician should be aware that receipt of a Statement of Need from the Government of Canada does not constitute a guarantee of employment including employment in the practice of medicine in the specialty for which he will have received training.
Requirements for Obtaining a Statement of Need From the Government of Canada for Medical Graduates Seeking Postgraduate Training in the United States (2004)

Description of Application Categories A, B, and C
An eligible medical graduate can apply for a Statement of Need in one of three categories. The categories are described on the following pages. Most applicants fall under Category A or C. Please read the descriptions of Categories A and C before reading the description of Category B. Once you have determined your category, turn to the appropriate page for the list of required documents that you must include in your application to Health Canada for a Statement of Need.

Category A comprises medical graduates currently enrolled in a Canadian medical residency training program. These applicants will be undertaking postgraduate medical specialty training already included in provincial or territorial physician resource plans.

Category A applicants must obtain a letter of endorsement from a Canadian provincial or territorial Ministry of Health or equivalent. The letter must state that there is a need for qualified practitioners in the proposed medical specialty and that the training is consistent with the province's or territory's physician resource plan.

Category A applicants can participate in the recruitment process by signing the “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes.”

In Ontario and Quebec only, a final year medical student may apply under Category A for a Statement of Need in support of a full residency training program in the United States.

Physicians will be subject to any physician resource management policies in existence at the time of their return to Canada. Physician’s practice in a province or territory will be subject to obtaining certification from the Royal College of Physicians and Surgeons of Canada and licensure from the provincial or territorial licensing body according to the requirements in place at the time of application for a medical licence.

If you will be undertaking postgraduate medical training while enrolled in, or as an extension to, a Canadian medical residency training program, please refer to the Category A list of required documents.
Category B comprises medical graduates not currently enrolled in Canadian postgraduate medical training and not already fully licensed to practise medicine in a specialty in a Canadian province or territory.

Applicants shall be pursuing training that will enable them to obtain specialty certification by the Royal College of Physicians and Surgeons of Canada, or specialist certification in a province or territory, and a licence to practice medicine in a province or territory in Canada, and physicians qualified in that specialty are needed in Canada.

For 2004, the following provinces will provide Health Canada with a list of needed specialties for the purpose of issuing Statements of Need.


The Ministries of Health or equivalent in these jurisdictions of will, on an annual basis, inform Health Canada of their physician resource plans and their needs for qualified practitioners in medical specialties and subspecialties.

The following territories have access to the list of physicians available for recruitment. the Northwest Territories, Yukon Territory.

All new applicants in Category B must make a formal written request for provincial endorsement in a province through Health Canada. The medical specialty must be one that has been identified in provincial physician resource plans. A list of identified medical specialties is available to applicants upon request; the list is revised annually and is available at the beginning of each year.

The applicant is requested to sign the “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes.” By signing this form, the individual permits Canadian provincial and territorial health authorities to initiate the process of recruitment of an individual for employment in Canada after completion of postgraduate medical training in the United States.

If you are currently neither enrolled in Canadian postgraduate medical training, nor fully licensed to practise medicine in Canada in the specialty for which training is being sought, please refer to the Category B list of required documents.
**Category C** comprises physicians already fully licensed to practise medicine in a medical specialty in a Canadian province or territory.

These applicants will be undertaking additional medical specialty training in their current field of practice and which is in a specialty already included in provincial and territorial physician resource plans.

A letter of endorsement from a Canadian provincial or territorial Ministry of Health or equivalent is not required, unless you are licenced in Quebec or you are changing your field of practice completely.

(1) Physicians who are currently licenced and certified in Quebec. These applicants must obtain a letter of endorsement from the Ministère de la Santé et des Services sociaux for their initial application. **Exception: training programs of six months or less.**

(2) Physicians who are changing the field of practice in which they are currently licenced and certified. The training may provide the physician with additional certification from the Royal College of Physicians and Surgeons of Canada; if this is the case, a provincial letter is required. The physician should obtain a letter of endorsement from the Canadian provincial or territorial Ministry of Health or equivalent in the province or territory in which they are currently licenced to practice medicine and to which they intend to return. The letter must state that there is a need for qualified practitioners in the proposed medical specialty, and that the training is consistent with that province or territory's physician resource plan. **Note: The Ontario Ministry of Health and Long Term Care no longer requires a Category C applicant who is a resident of Ontario to obtain a provincial letter.**

If you are fully licensed to practise medicine in Canada and are applying to undertake additional medical postgraduate training in your current field of practice, please refer to the Category C list of required documents.

If you are fully licensed to practise medicine in Canada and are applying to undertake medical postgraduate training that is different from your current field of practice, please refer to the Category C list of required documents.
New Application for a Statement of Need

To obtain a Statement of Need from the federal Department of Health (Health Canada) in support of postgraduate medical training in the United States, eligible medical graduates must submit a complete application including required documentation in Category A, Category B or Category C.

Please refer to description of the three categories to determine your category and then refer to the list of required documents to be submitted.

Signed forms and signed letters may be submitted by facsimile or electronic mail

Submitted documents will not be returned.

CERTIFIED documents must be sent by mail or courier.

All required documents to complete an application for a Statement of Need must be sent to the following address.

Regular Mail
Ms. Judith Lewis, Program Administrator
Statement of Need / J1 Visa Program
Health Human Resource Strategies Division
Health Care Policy Directorate
Health Policy and Communications Branch
Health Canada
Jeanne Mance Building 1918C
Tunney’s Pasture, Ottawa, Ontario, K1A 1B4

By Facsimile
Ms. Judith Lewis, Program Administrator
Statement of Need / J1 Visa Program
Health Human Resource Strategies Division
Fax: (613) 948 8081

By Electronic Mail
Judith_Lewis@hc-sc.gc.ca
Subject Line:
Application for Statement of Need, “Your Name”
A minimum of 14 working days is required to process an application and issue the Statement of Need. Every effort is made to process applications as quickly as possible, especially during the months of March and April of each year. The Statement of Need, bearing the seal of the Canadian Federal Department of Health, is delivered to the Educational Commission for Foreign Medical Graduates (ECFMG) in Philadelphia, Pennsylvania. A copy of the signed Statement of Need is mailed by Canada Post to the applicant.
**Category A List of Required Documents**

**Under Category A, you must:**

1. Provide proof of Canadian citizenship or permanent residency by submitting a certified copy of one of the following documents.
   - Canadian citizenship card
   - Canadian Passport
   - Record of birth
   - Record of Landing
   - Permanent Resident Card

2. Provide a letter of approval from a Dean (or Assistant/Associate Dean) of Postgraduate Medical Education, or of a Faculty, or of a College of Medicine in Canada. Final year medical students in Quebec and Ontario must contact and obtain a letter from the Dean (or Assistant/Associate Dean) of undergraduate medical education.

3. Provide a letter of endorsement from a Canadian provincial or territorial Ministry of Health or equivalent stating that there is a need for qualified practitioners in the proposed medical specialty training, and that the training is consistent with the province's or territory's physician resource plan.

   *Note* For training of six months or less, a letter of endorsement from a Canadian provincial or territorial Ministry of Health or equivalent is not required; however, applicants would not be eligible for an extension without provincial endorsement.

4. Provide a signed application form and two photocopies.

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\(^2\) Within the meaning of the *Immigration Act*, R.S.C., 1984, c. I-20, including any subsequent amendments to the Act or its Regulations.

\(^3\) A certified copy of a document can be obtained from a Commissioner of Oaths, a Notary Public or a lawyer.
5. Provide a copy of a letter of offer or a training contract for a fellowship or subspecialty from the clinical training program in the United States.

Optional

6. (i) Provide a signed original and two photocopies of the “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes.”

(ii) Provide two copies of your curriculum vitae.
Category B List of Required Documents

Under Category B, you must:

1. Provide proof of Canadian citizenship or permanent residency by submitting a certified copy of one of the following documents.

   • Canadian citizenship card
   • Canadian Passport
   • Record of birth
   • Record of Landing
   • Permanent Resident Card

2. Provide a certified copy of a document from the Medical Council of Canada confirming a passing mark in the Evaluating Examination.

   Note: If you have passed the Qualifying Examination Part I, or Part II, or achieved the LMCC, you may submit evidence of these instead.

3. For medical specialty training programs of two years or more in duration, provide a letter from the Royal College of Physicians and Surgeons of Canada indicating that the clinical training program in the United States would be recognized in full or in part to the extent that the content of training satisfies the College's training requirements.

Note Requests to the Royal College of Physicians and Surgeons of Canada may be directed in writing to: Credentials Unit, Royal College of Physicians and Surgeons of Canada, 774 Echo Drive, Ottawa, by facsimile (613) 730-3707, or by email to credentials@rcpsc.edu, with “J1 Visa Letter” in the subject line. The request must include a copy of the residency training contract with the U.S. program.

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4 Within the meaning of the Immigration Act, R.S.C., 1984, c. I-20, including any subsequent amendments to the Act or its Regulations.

5 A certified copy of a document can be obtained from a Commissioner of Oaths, a Notary Public or a lawyer.
4. Provide a copy of a letter of offer for a residency training position, or a residency training contract, from the clinical training program in the United States.

5. Provide a signed application form and two photocopies.

For 2004, the following provinces have provided Health Canada with a list of needed specialties for the purpose of issuing Statements of Need: BRITISH COLUMBIA, ALBERTA, SASKATCHEWAN, MANITOBA, ONTARIO, NOVA SCOTIA, PRINCE EDWARD ISLAND, NEWFOUNDLAND AND LABRADOR, NEW BRUNSWICK.

6(i) Provide an individual letter from yourself to Health Canada identifying the application as Category B. All applicants in Category B must make a formal written request for provincial endorsement from one or more province above through Health Canada, for the intended medical specialty.

The medical specialty must be one that has been identified in provincial physician resource plans. A list of identified medical specialties is available to applicants upon request; the list is revised annually and is available at the beginning of each year.

6(ii) Submit one original and two photocopies of the signed “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes."

6(iii) Provide two copies of your curriculum vitae.

By signing the consent form, the individual permits Canadian provincial and territorial health authorities to initiate the process of recruitment of an individual for employment in Canada after completion of postgraduate medical training in the United States.

**And, if you are a resident of Ontario.**

6(iv) Provide evidence of residence in that province: Driver’s Licence or Health Card.
Family Medicine / Family Practice
- Applications under Category B

Applicants whose permanent residence is Ontario, Alberta, Nova Scotia, New Brunswick, or Newfoundland and Labrador may request a Statement of Need in support of postgraduate medical training in Family Medicine. Residents of the above-named provinces are required to submit evidence of permanent residence such as a provincial Health Card or permanent Driver’s Licence.

Residents of other provinces may submit an application, but the number of Statements of Need that can be issued for these applicants for Family Medicine will be limited. The number of Statements of Need issued for Family Medicine will depend on how many have been identified by the group of provinces that have submitted a list of needed specialties to Health Canada.

Applicants should submit documents under Category B, except for item 3 (letter from the Royal College of Physicians and Surgeons of Canada). Instead, applicants should ensure that they are aware of medical licensing requirements for the province or territory to which they intend to return as well as the process for obtaining certification in Family Medicine.

If you are applying for a Statement of Need in support of postgraduate medical training in Family Medicine, please contact the Program Administrator for further information.
Category C List of Required Documents

Under Category C, you must:

1. Provide proof of Canadian citizenship or permanent residency by submitting a certified copy of one of the following documents.
   - Canadian citizenship card
   - Canadian Passport
   - Record of birth
   - Record of Landing
   - Permanent Resident Card

2. Provide a certified photocopy of current licence to practise medicine in the province or territory of residence.

3. Provide a certified photocopy of a certificate from the Royal College of Physicians and Surgeons of Canada or other evidence of field of practice, such as a letter from an employer, or a statement of prior postgraduate medical training, and a certificate from the College of Family Physicians.

4. Provide a signed original application form and two photocopies.

5. Provide a copy of the letter of an offer or the residency training contract from the clinical training program in the United States.

If you are a resident of the Province of Quebec, you must:

6. Provide a letter of endorsement from the Ministère de la Santé et des Services sociaux stating that there is a need for qualified practitioners in the proposed

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6 Within the meaning of the Immigration Act, R.S.C., 1984, c. I-20, including any subsequent amendments to the Act or its Regulations.

7 A certified copy of a document can be obtained from a Commissioner of Oaths or a Notary Public.
medical specialty, and that the training is consistent with that province's physician resource plan.  
*Note: For training of six months or less, a letter of endorsement is not required*

**Optional**

7. (i) Provide a signed original and two photocopies of the “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes.”  
(ii) Provide two copies of your curriculum vitae.

**If you are changing your field of medical practice:**

8. You may be asked to provide a letter of endorsement from the Canadian provincial or territorial Ministry of Health or equivalent in the province or territory in which you are currently licenced to practice medicine. The proposed training may provide the physician with additional certification from the Royal College of Physicians and Surgeons of Canada; if this is the case, a provincial letter may be required. The letter would state that there is a need for qualified practitioners in the proposed medical specialty, and that the training is consistent with that province's physician resource plan.  
*Note: The Ontario Ministry of Health and Long Term Care no longer requires Category C applicants to obtain a provincial letter.*
Renewal of a Statement of Need

Change of Specialty, Change of Location, or Extension of Program for Fellowship or Subspecialty

General

Candidates who wish to change specialty, change location, or undertake additional postgraduate medical training in a subspecialty or fellowship program in the U.S. must apply to Health Canada for a new Statement of Need.

In general, the applicant remains in the same category as the initial application.

Important Notes for Category B Renewals:

(1) If the physician has not previously obtained a written contract or return in service agreement, the applicant can request renewal of their Statement of Need directly from Health Canada. Approval of requests for Statements of Need in support of additional training will depend on current provincial and territorial needs, as reflected in the annual list of needed specialties.

(2) If the physician has previously obtained a contract, a return-in-service agreement, or other written commitment, written consent must be obtained from the regional health facility for the change of specialty or location, or agreement to the additional training. This consent must be provided to the appropriate Canadian provincial or territorial Ministry of Health in order to obtain a provincial letter of endorsement for the change in specialty, the change in location, or the additional training. In Ontario, in instances where the regional health facility indicates that they do not require the proposed specialty, the applicant can still request renewal of their Statement of Need directly from Health Canada and approval of requests for a Statement of Need in support of additional training will depend on current provincial and territorial needs, as reflected in the annual list of needed specialties.

Change of Specialty - list of documents to submit

The physician must submit a new application with all required documentation.
Requirements for Obtaining a Statement of Need From the Government of Canada for Medical Graduates Seeking Postgraduate Training in the United States (2004)

Change of Location of the Residency Training Program - list of documents to submit

1. provide a completed application form

2. for Category A: provide a new letter of endorsement from the Canadian provincial or territorial Ministry of Health stating agreement to the change in location.

   OR (Refer to Important Notes for Category B Renewals)

   for Category B, with previous return-in-service agreements: provide a new letter of endorsement from the Canadian provincial or territorial Ministry of Health stating agreement to the change in location.

   OR

   for Category B, with no previous return-in-service agreements: provide a new individual letter, requesting continued provincial endorsement at the new location.

   OR

   for Category C: a new letter from the Canadian provincial or territorial Ministry of Health is not required.

3. provide a letter from the Royal College of Physicians and Surgeons of Canada indicating that the clinical training program in the United States would be recognized in full or in part to the extent that the content of training satisfies the College's training requirements. *Required for training programs that will be two years or more in length. It is recommended that the applicant ensure any one-year programs will meet Royal College requirements.*

   Note Requests to the Royal College of Physicians and Surgeons of Canada may be directed in writing to: Credentials Unit, Royal College of Physicians and Surgeons of Canada, 774 Echo Drive, Ottawa, by facsimile (613) 730-3707, or by email to credentials@rcpsc.edu, with “J1 Visa Letter” in the subject line. The request must include a copy of the residency training contract with the U.S. program.

4. provide a copy of the new letter of offer or contract for the residency from the new location.
(5) Category B: for renewals of Statements of Need that were issued prior to 2001, the applicant must meet the current minimum examination requirement, the Evaluating Examination for International Medical Graduates. Submit a certified document from the Medical Council of Canada confirming a passing mark in one of the following: MCC EE, QE Part I, QE Part II, or the LMCC certificate. Note: If this requirement has already been met, it is not necessary to resubmit the document.

(6) Optional: provide a signed original of the “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes” and your CV. If the applicant already has a return-in-service agreement or contract with a province, this consent should not be submitted.

Extension of Program (Fellowships and Sub-Specialties) - list of documents to submit

(1) provide a completed application form

(2) for Category A renewals: provide a new letter of endorsement from the Canadian provincial or territorial Ministry of Health affirming that the additional training is consistent with the existing provincial or territorial physician resource plan, and stating agreement to the additional training.

OR (Refer to Important Note for Category B Renewals)

for Category B renewals, with no previous return-in-service agreements: provide a new individual letter, requesting continued provincial endorsement for the additional training in a fellowship or subspecialty program, directly from Health Canada from one or more of the participating provinces. Approval of requests for a Statement of Need in support of additional training will necessarily depend on current provincial and territorial needs, as reflected in the annual list of needed specialties.

OR

for Category B renewals, with previous return-in-service agreements: provide a new letter of endorsement from the Canadian provincial or territorial Ministry of Health affirming that the training in the fellowship or subspecialty continues to be consistent with the existing provincial or territorial physician resource plan, and stating agreement to the additional training.
OR

for Category C renewals: a new letter from the Canadian provincial or territorial Ministry of Health is **not** required.

(3) provide a copy of the new letter of offer or contract for the fellowship or subspecialty from the United States facility.

(4) provide a letter from the Royal College of Physicians and Surgeons of Canada indicating that the clinical training program in the United States would be recognized in full or in part to the extent that the content of training satisfies the College's training requirements. **Required for training programs that will be two years or more in length. It is recommended that the applicant ensure any one-year programs will meet Royal College requirements.**

**Note** Requests to the Royal College of Physicians and Surgeons of Canada may be directed in writing to: Credentials Unit, Royal College of Physicians and Surgeons of Canada, 774 Echo Drive, Ottawa, by facsimile (613) 730-3707, or by email to credentials@rcpsc.edu, with “J1 Visa Letter” in the subject line. The request must include a copy of the residency training contract with the U.S. program.

(5) for Category B renewals of Statements of Need that were issued **prior to 2001**, the applicant **must** meet the current minimum examination requirement, that is, the Evaluating Examination for International Medical Graduates. Submit a certified document from the Medical Council of Canada confirming a passing mark in one of the following: MCC EE, QE Part I, QE Part II, or the LMCC certificate. **Note: If this requirement has already been met, it is not necessary to resubmit the document.**

(6) **optional:** provide a signed original of the “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes” and your CV. If the applicant has a return in service agreement or contract, this consent should not be submitted.
Medical Licensure and Specialty Certification in Canada:
- Important Sources of Information

Royal College of Physicians and Surgeons of Canada
http://rcpsc.medical.org
Telephone: (613) 730-8177 or 1-800-668-3740
Facsimile: (613) 730-3707

College of Family Physicians of Canada
http://www.cfpc.ca
Telephone: (905) 629-0900 or 1-800-387-6197
Facsimile: (905) 629-0893

Collège des médecins du Québec
http://www.cmq.org
Telephone: (514) 933-4441 or 1-888-MEDECIN
Facsimile: (514) 933-3112

Medical Council of Canada
http://www.mcc.ca
Telephone: (613) 521-6012
Facsimile: (613) 521-9417

The Federation of Medical Licensing Authorities of Canada
http://www.fmlac.com
Telephone: (613) 738-0372
Facsimile: (613) 738-8977
Other Resources:

Provincial and Territorial websites

Governement du Québec:  http://www.gouv.qc.ca
  Ministère de la Santé et des Services sociaux:  http://www.msss.gouv.qc.ca
  Recrutement Santé Québec:  http://www.msss.gouv.qc.ca/rsq
  Ministry of Health and Long Term Care:  http://www.health.gov.on.ca
  Ontario Repatriation Program: Email:  HPBProgramOfficer@moh.gov.on.ca
  Ontario IMG Program:  http://www.library.utoronto.ca/medicine/oimg
Government of British Columbia:  http://www.gov.bc.ca
  Health Match BC:  http://www.healthmatchbc.org
  Medical Licensure Program for International Medical Graduates
  Saskatchewan Physician Recruitment Project:  http://www.mddoportunity.org
  Alberta Health and Wellness:  http://www.health.gov.ab
  Rural Physician Action Plan:  http://www.rpap.ab.ca
Government of New Brunswick:  http://www.gnb.ca
  Department of Health and Community Services:  http://www.gov.nf.ca/health
Government of the Northwest Territories:  http://www.gov.nt.ca
  Department of Health and Social Services:  http://www.hlths.gov.nt.ca

Related websites

Canadian Institute for Health Information:  http://cihi.ca
Canadian Medical Association:  http://www.cma.ca
Canadian Residency Matching Service (CaRMS):  http://carms.ca
Federal Government websites

Canada: http://www.gc.ca
Health Canada: www.hc-sc.gc.ca
   First Nations and Inuit Branch  
Canadian Health Network  
   http://www.canadian-health-network.ca
Indian and Northern Affairs Canada: http://www.ainc-inac.gc.ca
Citizenship and Immigration Canada: http://www.cic.gc.ca
Human Resources Development Canada: http://www.hrdc-drhc.gc.ca

US websites

American Medical Association: http://www.ama-assn.org
National Residency Matching Program (NRMP): http://www.nrmp.org
Federation of State Medical Boards: http://www.fsmb.org
American Board of Medical Specialties: http://www.abms.org
U.S. Department of State: http://exchanges.state.gov/education/jexchanges
Educational Commission for Foreign Medical Graduates: http://www.ecfmg.org
Provincial & Territorial Ministries/Departments of Health:
List of Contact Names

NEWFOUNDLAND and LABRADOR
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Consent for Recruitment

Reason for Consent
Under the Canadian Constitution, provincial and territorial governments have the primary responsibility for the delivery of health services, including training, licensure and management of physicians. Provincial and territorial governments wish to recruit physicians, who are pursuing postgraduate medical training in the United States, to return to particular areas or facilities in Canada at the completion of their training. For this reason, applicants are requested to consent to the disclosure of personal contact information by the federal government to provincial and territorial governments for recruitment purposes. Note that disclosure of contact information will not automatically result in employment offers. Declining to sign this consent to the disclosure of personal information will not affect Health Canada’s decision whether or not to issue a Statement of Need.

Type of Personal Information to which the Consent Refers
Physician’s name, mail and e-mail address(es), and contact number(s) in the United States
Area of medical specialty training
Expected or anticipated date of completion of postgraduate medical training in the U.S.
Name(s), mailing address(es), e-mail address(es) and contact telephone number(s) of the physician’s program director(s), hospital(s) and university(ies) in the United States.
Province or territory which provided a letter of endorsement or support (only if applicable).

Intended Purpose of Disclosure of Personal Information
Provincial and territorial governments and regional health authorities will use the information for recruitment purposes.

Organizations to which Disclosure will be made
Provincial and territorial Ministries of Health or equivalent, and/or regional health authorities.

Safeguards to Protect Individual Privacy
Health Canada will periodically send to provincial and territorial governments a printed or electronic report on the numbers of physicians who are training in the U.S. with a J-1 Visa, the areas of medical specialty, and the expected or anticipated dates of completion of training. Specific personal information will not be included in these reports. Health Canada will release the personal information to which this consent refers, as described above, only after a request is made by a province or territory.

Applicant’s Initials: _______________
Consent for Recruitment

The personal information will be released to a provincial or territorial government physician resource planning officer, to a provincial or territorial government physician recruitment officer, or to a recruitment officer from a regional health authority.

Health Canada has an agreement with the provincial or territorial government representative or the regional health authority representative stipulating that he or she will not disclose personal information to any other persons or organizations without first obtaining the physician's consent.

Physicians have the right to examine their record held at Health Canada and to request correction, if required.

I consent to the disclosure of personal information to provincial and territorial governments and/or regional health authorities for recruitment purposes.

Signatures of Applicant and Witness

Print Name of Applicant  Signature of Applicant

Date

This Consent is Signed in the Presence of:

Print Name of Witness  Signature of Witness

Date

Declining to sign this consent to the disclosure of personal information will not affect Health Canada’s decision whether or not to issue a Statement of Need.

Please remember to submit both pages of this form.
## Application Form for a Statement of Need: Personal Information

<table>
<thead>
<tr>
<th>LAST NAME</th>
<th>FIRST NAME(S)</th>
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<tbody>
<tr>
<td>Check one:</td>
<td></td>
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<tr>
<td>☐ Initial Application</td>
<td>☐ Request for Change of Specialty</td>
</tr>
<tr>
<td>☐ Request for Extension -Fellowship or Sub-Specialty</td>
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</table>

Date(s) of previous application(s)

Current Mailing Addresses in Canada and the U.S.

Permanent Address in Canada

Work Number___________ Home___________ Pager___________
Facsimile___________ E-Mail___________

Country of Citizenship___________ Country of Birth___________

Name & Country of Medical School

Year Medical Degree Awarded

<p>| All Completed and Current Postgraduate Medical Specialty Training: |
|-------------------------|------------------|------------------|</p>
<table>
<thead>
<tr>
<th>University/Country</th>
<th>Dates</th>
<th>Specialty</th>
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USMLE / ECFMG Number

Specialty/Sub-Specialty in which Postgraduate Training is Planned

If Family Medicine, check here: ☐

Years Required by RCPSC for the Specialty/Sub-Specialty

Date Training Begins ____________________ Duration ____________________

Name of Program Director

Full Name, Address, Telephone No., Facsimile No. of University and Hospital in the United States

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Requirements for Obtaining a Statement of Need From the Government of Canada for Medical Graduates Seeking Postgraduate Training in the United States (2004)

Application Form for a Statement of Need: Signature Page

I HEREBY STATE THAT:

! I intend to return to Canada on completion of my postgraduate medical specialty training in the United States.
! On my return to Canada, I intend to enter the practice of medicine in the medical specialty for which I will have received training. I wish to return to the province(s) and/or territory(ies) of ____________________________.
! I understand that the medical specialty training that I will receive in the United States may not meet the specifications of Canadian licensure or certification bodies.
! I acknowledge that it is my responsibility to become fully informed of and fully meet all Canadian medical licensure and certification requirements in order to practise medicine in Canada and I agree to ensure my training will enable me to obtain a medical licence in a province or territory.
! I understand that receipt of a Statement of Need from the Government of Canada does not constitute a guarantee of employment including employment in the practice of medicine in the specialty for which I will have received training.
! I have _______ / have not _______ signed the form “Consent to the Disclosure of Personal Information to Provincial and Territorial Governments for Recruitment Purposes.”

Signatures of Applicant and Witness

______________________________  ______________________________
Print Name of Applicant        Signature of Applicant

Date ____________________________

This Consent is Signed in the Presence of:

______________________________  ______________________________
Print Name of Witness           Signature of Witness

Date ____________________________

Please remember to submit both pages of this form.