IC Inter/Intra Transfer Request
(use for NIH sponsored J-1 Exchange Visitors only)

INSTRUCTIONS: This form should be completed by the new Institute/Center (IC) lab wishing to transfer a J-1 Exchange Visitor from one NIH IC lab to another. This form, along with the usual IC transfer paperwork, should be sent to DIS at least 2-3 months before the effective date of transfer. A reminder on the transfer paperwork requirements can be found on our Renewal/IC Transfer checklists, located on our forms page at: http://www.ors.od.nih.gov/pes/dis/AdministrativeStaff/Pages/Checklists.aspx

The J-1 Exchange Visitor Program allows for movement as necessary to facilitate the J-1 Exchange Visitor’s research objectives. In order to comply with this requirement, the releasing IC sponsor must verify that the research described below by the new IC is a continuation of the research objectives originally started at NIH.

NEW IC SPONSOR:
Proposed Effective date of Transfer: _____________________________________________
Name of J-1 Exchange Visitor: ____________________________________________________

Description of research activity at new lab: __________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

I confirm that the above description is correct:

____________________________               ______________________________  ___________________
Signature                                                        Name of New Lab Sponsor                         Date

RELEASING IC SPONSOR:
Please review the description of proposed research activities for the above J-1 Exchange Visitor:

1. Do you agree that the above description is consistent with the J-1 Exchange Visitor’s original research objective?
   ______ Yes          ______ No

2. Do you have any objections to the transfer? ______ Yes          ______ No

If you answered “No” to number 1, and/or “Yes” to number 2, please provide additional comments:
_____________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

____________________________               ______________________________  ___________________
Signature                                                        Name of Releasing Lab Sponsor                         Date

Submit this form and transfer paperwork via HAND-CARRY to: Division of International Services /ORS
(31 Center Drive, MSC 2028
Building 31, Rm B2B07
Bethesda, MD 20892-2028)

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