

## Study Abroad Italy

### APPLICATION INSTRUCTIONS FOR THE NATIONAL VISA-BOSTON CONSULATE

1. Surname (family name) **Your Last Name**
2. Surname(s) at birth: **Maiden Name if applicable or leave blank**
3. First names (given name): **First and Middle Name**
4. Date of birth (**day-month-year**)
5. Place of birth: **City and State of birth**
6. Country of birth: **Country of birth**
7. Current nationality/ies: **U.S. and/or other nationality**  
Original Nationality at birth if different: **U.S. and/or other nationality**
8. Sex: Check either **male** or **female**
9. Marital status: Check **your** marital status
10. In the cast of minors: Surname, first name, address, and nationality of legal guardian. **Only if you are under 18 years of age.**
11. Identity number: **Leave blank**
12. Type of travel document: **Check Ordinary Passport**
13. Number of travel document: **Write your passport number**
14. Date of issue: List **day-month-year** passport was **issued**
15. Valid until: List **day-month-year** passport is **valid until**
16. Issued by: **List the place where your passport was issued, which is stated under Authority on your passport**
17. Applicant's home address and e-mail address. Telephone number.
18. Residence in the country other than the country of current nationality: **Answer no unless you are currently living in a country other than your home country.**
19. Current occupation: **Student**
20. Employer and employers address and telephone number. For students, name and address of school: **List US school you are currently enrolled in and the complete address**
21. Main purpose of the journey: **Check Study**
22. City of destination: (**City**), **Italy**, (**Location of program**)

23. State of first entry: **Write city and country where your flight first lands after departing the US.**

24. Number of entries requested: **Check Multiple Entries**

25. Duration of the intended stay: **List the number of days of the term. Count ONLY the number of days of the program from Housing Check In until Housing Check Out. EVEN IF YOU ARE ARRIVING A FEW DAYS BEFORE OR LEAVING A FEW DAYS AFTER THE PROGRAM.** For 2 semesters count from Housing Check In of the first term until the last day of final exams of the second term.

26. Schengen visas issued during the past three years and their period of validity: The Schengen area includes: Austria, Belgium, Denmark, Finland, France, Germany, Greece, Iceland, Italy, Luxemburg, The Netherlands, Norway, Portugal, Spain, and Sweden. **List other visas obtained otherwise, answer No**

27. Fingerprints collected previously for the purpose of applying for a Schengen visa: **Check no unless this applies to you**

28. Entry permit for the final country of destination: **This does not pertain to you. Write N/A**

29. Date of arrival: **Actual date you will arrive.**

30. Date of departure: **Actual date you will depart.**

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**Sant'Anna Institute - Sorrento Lingue:** Via Marina Grande, 16, 80067 Sorrento (NA) Italy  
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**Torino Study Abroad:** Via Santa Teresa 20, 10121, Torino, Italy  
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31. **Address of your Italian school**-see above information  
**Write N/A in the 2 boxes below.**

32. Name and address of inviting company/organization: **Put name and address of your Italian school in one box, and then telephone number in the box next to it.**

**In the box below write: your admissions counselor's name and email. Then write: "address and telephone same as above".**

33. Cost of travelling and living expenses is covered by:

**If someone other than yourself is submitting their financial information write their name then write "See Affidavit of Support and Bank Letter/Statement"**

**If you are submitting your own financial information check "the applicant himself/herself" and then write "See Bank Letter/Statement" or "See Financial Aid Letter"**

Means of support:

**Check all appropriate answers such as cash, credit card, prepaid accommodation, prepaid transportation.**

**(Disregard the box on the right)**

34 - 35. Family members and family relationships with EU, EEA, or CH citizen: **Write N/A** for all numbers.

**If you are an EU Citizen please contact our office**

36. Place and date: **City and State where you are signing**

37. Signature: **Sign your name**

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Sign your name **AGAIN** in front of a **Notary Public** (ask your locale bank if they can do this for you)

(Since there is not an actual line for the Notary, have them put their signature and stamp at the bottom of the application on page 4)

Place and date: **City and State where you are signing**

**For those students who are applying on their own, appearing in person at the Consulate, you must sign your Student Visa Application in front of a Consular Officer. You will not get your application notarized before hand.**

**The Italian Consulate will render applications with white-out, crossed out, or written over answers invalid. If you make a mistake while filling it out, please print out a new application.**



Consulate General of Italy  
Boston



Application for National Visa (D)  
This application form is free

1. Surname (s) (family name(s) ) (x)				<p>.....</p> <p><b>FOR EMBASSY /CONSULATE USE ONLY</b></p> <p>Date of application:</p> <p>Visa application number:</p> <p>Application lodged at:</p> <input type="checkbox"/> Embassy/Consulate <input type="checkbox"/> City hall CAC <input type="checkbox"/> Service provider <input type="checkbox"/> Commercial Intermediary <input type="checkbox"/> Other <p>Name:</p> <p>File handled by:</p> <p>Name of person who received file at window:</p> <p>Supporting documents:</p> <input type="checkbox"/> Travel document <input type="checkbox"/> Means of substance <input type="checkbox"/> Invitation <input type="checkbox"/> Means of transport <input type="checkbox"/> Travel Health insurance <input type="checkbox"/> Other <p>Visa decision:</p> <input type="checkbox"/> Refused <input type="checkbox"/> Refused for SIS non cancellable. <input type="checkbox"/> Suspended File <input type="checkbox"/> Issued <p>Type of visa:</p> <input type="checkbox"/> D <p><input type="checkbox"/> Valid: from ..... until.....</p> <p>Number of entries:</p> <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiple			
2. Surname(s) at birth (former family name(s)) (x)							
3. First names (given names) (x)							
4. Date of birth (day-month-year)		5. Place of birth/.....		7. Current nationality			
.....		6. Country of birth/.....		Nationality at birth, if different:		.....	
8. Sex/.....		9. Marital status/.....					
<input type="checkbox"/> Male <input type="checkbox"/> Female		<input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow/er <input type="checkbox"/> Other (please specify)/.....(.....).....					
10. In the case of minors: Surname, first name, address (if different from applicant's) and nationality of parental authority/legal guardian/.....							
11. National Identity number, where applicable/.....							
12. Type of travel document/.....							
<input type="checkbox"/> Ordinary passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Official passport <input type="checkbox"/> Special passport. <input type="checkbox"/> Other travel document (please specify)							
13. Number of travel document/.....		14. Date of issue.....		15. Valid until.....		16. Issued by.....	
17. Applicant's home address and e-mail address				Telephone number (s)/.....			
.....				.....			
18. Residence in a country other than the country of current nationality/.....							
<input type="checkbox"/> No <input type="checkbox"/> Yes. Residence permit or equivalent/ ..... No..... Valid until/.....							
19. Current occupation/.....							
20. Employer and employer's address and telephone number. For students, name and address of educational establishment. .....							
21. Main Purpose(s) of the journey/.....							
<input type="checkbox"/> Family reunion/Visiting Family <input type="checkbox"/> Sports <input type="checkbox"/> Business <input type="checkbox"/> Diplomatic <input type="checkbox"/> Religious <input type="checkbox"/> Study <input type="checkbox"/> Adoption <input type="checkbox"/> Employment <input type="checkbox"/> Medical treatment <input type="checkbox"/> Self employment <input type="checkbox"/> Other (please specify)							

(x) In fields from 1 to 3 information must be inserted as it appears on travel documents.

22. City of destination		23. State of first entry	
24. Number of entries requested/ .....: <input type="checkbox"/> One/..... <input type="checkbox"/> Two/..... <input type="checkbox"/> Multiple/.....		25. Duration of the stay. Indicate number of days (max. 365 days) / .....:	
26. Schengen visas issued during the past three years / .....: <input type="checkbox"/> No/... <input type="checkbox"/> Yes. Date(s) of validity / ..... from/..... to /.....			
27. Fingerprints taken previously for the purpose of applying for a Schengen visa .....: <input type="checkbox"/> No/... <input type="checkbox"/> Yes/... Date, if known/.....			
28. Number of no objection document issued for family reunification/accompanying family/employment (only in case where required by legislation governing the type of being requested)/ ..... Issued by SUI of / ..... Valid from/..... until/.....			
29. Intended date of arrival in the Schengen area .....:		30. Intended date of departure from the Schengen area (only for visas valid for stays of between 91-364 days) .....:	
31. Surname and first name of the inviting person or employer. If not applicable, in case of visa for Adoption, Religious reasons, Medical reasons, Sports, Study, Mission: address of institution in Italy. .....			
Address and e-mail address of inviting person(s) or employer .....		Telephone and fax of inviting person(s) or employer.....	
32. Name and address of inviting company/organisation /.....		Telephone and fax of company/organisation .....	
Surname and first name, address, telephone, fax and e-mail address of contact person in company/organisation/ .....			
33. Cost of travelling and living expenses is covered by /.....:			
<input type="checkbox"/> by the applicant himself/herself/ ..... Means of support/.....: <input type="checkbox"/> Cash/ ..... <input type="checkbox"/> Traveller's cheques/..... <input type="checkbox"/> Credit card/..... <input type="checkbox"/> Prepaid accommodation/..... <input type="checkbox"/> Prepaid transport/..... <input type="checkbox"/> Other (please specify)/.....:..... STATEMENT NOT NECESSARY FOR FOLLOWING VISAS: Family reunion, Accompanying Family, Employment/Self-employed, Business, Diplomatic, Adoption.		<input type="checkbox"/> by sponsor (host, company, organisation), specify/ ..... :..... Referred to in field 31 or 32 / ..... <input type="checkbox"/> other (please specify)/.....:..... Means of support/.....: <input type="checkbox"/> Cash/..... <input type="checkbox"/> Accommodation provided..... <input type="checkbox"/> All expenses covered during the stay/ ..... <input type="checkbox"/> Prepaid transport/..... <input type="checkbox"/> Other (please specify)/ .....(.....):.....	

34. Personal data of the family member who is an EU, SEE or CH citizen / .....		
Surname / .....		First name(s) / .....
Date of birth / .....	Nationality / .....	Number of travel document or ID card .....
35. Family relationship with an EU, SEE or CH citizen/ .....		
<input type="checkbox"/> spouse/..... <input type="checkbox"/> child/ ...../.. <input type="checkbox"/> other direct descendant/..... <input type="checkbox"/> dependent ascendant/.....		
36. Place and date / .....		37. Signature (for minors, signature of parental authority/legal guardian)/ ..... (.....)

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 .....

**I am aware that the visa fee is not refunded if the visa is refused.**  
 .....

**I am aware of and consent to the collection of the data required by this application form and the taking of my photograph and, if applicable, the taking of fingerprints. I understand these, are mandatory for the examination of the visa application. Any personal data concerning me which appear on the visa application form, as well as my fingerprints and my photograph, will be supplied to the relevant Italian authorities and processed by those authorities , for the purposes of a decision on my visa application.**  
**Such data, as well as data concerning the decision taken on my application or a decision whether to annul, revoke or extend a visa issued will be entered, and stored in the Information System of this Consulate General, and the Ministry of Foreign Affairs. Such data will be accessible to the competent Italian visa authorities. It will be accessible to the competent Schengen authorities in order to check on visas at external borders and within the Member States, immigration and asylum authorities in the Member States for the purposes of verifying whether the conditions for the legal entry into, stay and residence in the territory the Member States are fulfilled, of identifying persons who do not or who no longer fulfil these conditions, of examining an asylum application and of determining responsibility for such examination. Under certain conditions the data will also be accessible to authorities designated by the Member States and to Europol for the purpose of the prevention, detection and investigation of terrorist offenses and of other serious criminal offenses..**

**I am aware that I have the right to obtain the data transmitted relating to me recorded in the information systems and to request that data relating to me which are inaccurate be corrected and that data relating to me processed unlawfully be deleted. At my express request , the authority examining my application will inform me of the manner in which I may exercise my right to check the personal data concerning me and have them corrected or deleted, including the related remedies according to the national law.**  
**The national controlling Authority is the Guarantor of protection of personal data.**

**I declare that to the best of my knowledge all information supplied by me are complete and correct. I am aware that any false statements will lead to my application being rejected or to the annulment of a visa already granted and may also render me liable to prosecution under the law of the Representative country under State legislation (articolo 331 c.p.p.).**  
**The mere fact that a visa has been granted to me does not mean that I will be entitled to compensation if I fail to comply with the relevant provisions of Article 5, paragraph 1 of Regulation (EU) No. 562/2006 (Schengen Borders Code) and of Article 4 of D.Lgs. 286/98 and I am therefore refused entry.**

**ANNOTATIONS** (Office use only)  
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