



Ambasciata d'Italia

PHOTO

Application form for National Visa (D)
Free application form

1. Surname (Family Name) / (x)
2. Surname at birth (Former family name/s) / (x)
3. First name(s) (Given name (s))/ (x)
4. Date of birth (day-month-year)
5. Place of birth
6. Country of birth
7. Current nationality
8. Sex
9. Marital status
10. In case of minors: surname, first name, address...
11. National identity number...
12. Type of travel document
13. Number of travel document
14. Date of issue
15. Valid until
16. Issued by
17. Applicant's home address and e-mail address
18. Residence in a country other than the country of current nationality
19. Current occupation
20. Employer and employer's address and telephone number
21. Purpose of the journey
Supporting documents:
Visa Decision:
Type of visa:
Number of entries:

(x) Fields 1-3 shall be filled in in accordance with the data in the travel document.

22. City of destination	23. Eventual member State of first entry
24. Number of entries requested/: <input type="checkbox"/> Single entry/..... <input type="checkbox"/> Two entries/..... <input type="checkbox"/> Multiple entries/.....	25. Duration of the stay. Specify the 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 collected previously for the purpose of applying for a Schengen visa: <input type="checkbox"/> No/... <input type="checkbox"/> Yes/... Date, if known/.....	
28. Number of authorization SUI issued to join family member/accompany family member/subordinate employment (only if required by the law regulating the type of visa required)/ Issued by SUI of /..... Valid from/..... to/.....	
29. Intended date of arrival in the Schengen area	30. Intended date of departure from the Schengen area (only for visa with duration included between 91 and 364 days)
31. Surname and first name of the inviting person who has required the joining or of the employer. Otherwise, in case of Visas for Adoption, Religious reasons, Medical treatment, Sport, Study, Mission: address in Italy:	
Address and e-mail address of the inviting person (s) or of the employer	Telephone number and telefax of the inviting person (s) or of the employer
32. Name and address of the inviting company/organization	Telephone number and telefax of the company/organization
Surname, first name, address, telephone , telefax and e-mail address of contact person of the company/ organization /	
33. Costs of travelling and living during the applicant's stay is covered	
<input type="checkbox"/> by the applicant himself/herself Means of support/.....: <input type="checkbox"/> Cash/ <input type="checkbox"/> Traveller's cheque/..... <input type="checkbox"/> Credit cards/..... <input type="checkbox"/> Pre-paid accomodation/..... <input type="checkbox"/> Pre-paid transport/..... <input type="checkbox"/> Other (please specify)/..... UNNECESSARY INDICATION IN CASE OF THE FOLLOWING TYPES OF VISA: Joining or accompanying Family member, Subordinate or self employment/, Mission, Diplomatic, Adoption.	<input type="checkbox"/> by a sponsor (host, company, organization), please specify/ <input type="checkbox"/> Referred to in field 31 or 32 / <input type="checkbox"/> other (please specify)/.....: Means of support/.....: <input type="checkbox"/> Cash/..... <input type="checkbox"/> Accomodation provided/..... <input type="checkbox"/> All the expenses covered during the stays/ <input type="checkbox"/> Pre-paid transport/..... <input type="checkbox"/> Other (please specify)/(.....):.....

34. Personal data of the family member who is an EU, SEE or CH /		
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"/> son/daughter/.. <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.

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I am aware of and consent to the following: the collection of the data required by this application form and the taking of my photograph and, if applicable, the taking of fingerprints, are mandatory for the examination of the visa application; and 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 them, 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 into, and stored in the informatic system of the Consular Diplomatic Representation and of the Ministry of foreign affairs. Such data will be accessible to the National Visa authorities. Furthermore, they will be accessible to the visa authorities and the authorities competent for carrying out checks 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 on the territory of 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 be also available to designated authorities of the Member States and to Europol for the purpose of the prevention, detection and investigation of terrorist offences and of other serious criminal offences.

I am aware that I have the right to obtain notification of the data relating to me recorded in the informatic system 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 authority for data control is the Guarantor for the personal data protection.

I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that any false statements will lead to my application being rejected or to the revocation of a visa already granted and may also render me liable to prosecution under the law of the Representation (Article 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(1) of Regulation (EU) No 562/2006 (Schengen Borders Code) and of Article 4 Legislative Decree 268/98 and I am therefore refused entry.

NOTES (for official use only)

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Place and date /

Signature (for minors, signature of parental authority/legal guardian) /
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