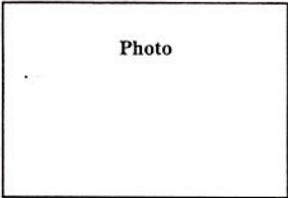


**Consulate General of Italy
Boston**



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

1. Surname (s) (family name(s)) (x)				FOR EMBASSY /CONSULATE USE ONLY				
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		Date of application: Visa application number: Application lodged at: <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		
6. Country of birth/.....		Nationality at birth, if different:						
8. Sex/..... <input type="checkbox"/> Male <input type="checkbox"/> Female		9. Marital status/..... <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)/.....(.....).....				Name: File handled by: Name of person who received file at window: Supporting documents: <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		
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/.....						Visa decision: <input type="checkbox"/> Refused <input type="checkbox"/> Refused for SIS non cancellable. <input type="checkbox"/> Suspended File <input type="checkbox"/> Issued		
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.....		Type of visa: <input type="checkbox"/> D <input type="checkbox"/> Valid: from until..... Number of entries: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiple	
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/.....						Current occupation/.....		
19. Current occupation/.....								
20. Employer and employer's address and telephone number. For students, name and address of educational establishment.						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"/> Other (please specify) <input type="checkbox"/> Self employment		
21. Main Purpose(s) of the journey/.....								

(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)/(.....):.....	

.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....
.....

Place and date /

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