



Consulate General of Italy

Photo

Application for a National Visa (D) Free form

1.Surname / (Family name	e) (x)						
	For official use only						
2. Surname at birth (Forn	Date of application:						
3. First Name(s) (Given na	ame(s)) (x)				Visa application	
4. Date of birth (day-month-year)		5. Place of bir 6. Country of	f birth:	7. Current nationality Nationality at birth (if different)		Application lodged at: Embassy/Consulate Common Centre Service provider	
8. Sex: Male Female	Single Separate Widow(e) Other (pl	9. Marital status: Single Married Separated Divorced Widow(er) Other (please specify):			☐ Commercial intermediary ☐ Other Name: File handled by:		
10. In the case of minors: nationality of legal guard	Supporting documents: Travel document Means of subsistence						
11. National identity num	☐Invitation ☐Means of transport						
12. Type of travel docum	Travel insurance						
Ordinary passport	Diplon	natic passport	Service pass	sport	Official passpo	Accomodation Ort Other	
Special passport	Other ((please specify)	:				
13. Passport/travel document number:	ocument number:				16. Issued by:	Visa decision: Refused Refused by SIS	
17. Applicant's home add		lvoss and a mail address:		Telephone number:		Suspended file	
17. Applicant 5 nome acc	oress and	C Man addres		Telepii	one number.	∐ Issued	
						Type of visa:	
18. Residence in a country ☐No ☐Yes. Resid			of current nation valent Val			□ D Valid: from	
19. Current occupation:					epartment and "Un	egno di ricerca", write the name of the iversity of Bologna", address of the	
20. Employer's name, ad					•	number: 0512082550	
For students, name as 21. Purpose of the journey Joining family membe	☐ 2 ☐ Multiple						
Religious reasons Medical treatment	Number of days:						
Self employment	Other	rs (please, spec	Specify:	RESEARCI	H/RICERCA		

22. Town of destination:	23. Member state of entry:	
24. Number of entries required: One Two Multiple	25. Duration of the intended stay. Indicate number of days (max 365 days)	-
26. Schengen visas issued during the past 3		
27. Fingerprints collected previously for th	untile purpose of applying for a Schengen Visa:	
☐ Yes Date (if known)		
family member/Subordinate work (or	a" for the purpose of family joining/travelling with nly if specifically required for the visa) by the SUI of	
29 Intended date of arrival in the Schengen		-
area:	Schengen area (only for visas lasting within 91 and 364 days)	
31. Surname and name of the person asking Otherwise, for visa for Adoption, Religious		
name and surname of the D		
Address and e-mail address of the person(s) asking for family joining or of the employer		
ss of the Department; Diri.visiting@unibo.it	"Universi	the Department, follow ity of Bologna" of the Department
32. Name and address of inviting	Telephone and fax numbers of inviting	
company/organisation:	company/organisation Phone: 00390512082550	
	x and e-mail address of contact person within the	
	esk. Address: Via Filippo Re 4, Bologna. ases.visiting@unibo.	<u>it</u> ; Phone: 0039051208
33. Cost of travelling and living during the a		
by the applicant himself/herself		
Means of support:	referred to in field 31 or 32	
☐ Cash ☐ Traveller's cheque ☐ Credit card	other (please specify)	
☐ Prepaid accommodation ☐ Prepaid transport	Means of support:	
Other (please specify)	Cash Accommodation provided	
NOT NECESSARY IN CASE OF VISA FO Family joining, Accompanying, Subordinate work/Self employment, Mission, Diplomatic	☐ All expenses covered during the stay ☐ Prepaid transport	
mission, Adoption.	Other (please, specify):	