

Independent Italian Student Visa Packet

Before you begin:

- Ensure you have a passport valid for at least **six months after your program ends**. If not, you must immediately apply for/renew your passport immediately in order to have it in time to apply for your visa!
- Ensure you are able to be without your passport during the visa application period. Most independent applicants receive their visa within 2-3 weeks from the date of their application appointment. **Make an appointment now for no later than July 15, 2016.**
- Do not apply for your visa outside of the US. Students who have attempted this experienced difficulties (extra background checks, longer processing periods, etc.).
- You must apply **in person** at the consulate unless the consulate instructs you otherwise. Most visa applications cannot be mailed.
- There are 10 Italian consulates in the US and the visa requirements may vary, so please check your consulate's website. Do not compare notes with other students applying through the SU Abroad group submission as their instructions may differ. Follow the instructions in this packet only.
 - **Note:** the Los Angeles Consulate will not allow you to apply independently. You must apply for your visa with SU Abroad. Contact Gael Noyes with questions.
- **International students** contact Gael Noyes before applying for your visa.
- **Students with European Union citizenship** traveling with their EU passport do not need a visa. Contact Gael Noyes for more information.
- **Full year students:** If there is any chance that you may decide to stay in Italy for the academic year (fall 16/spring 17) with our program, you should get a visa to cover both semesters in advance. If you do not, you will have to return to the US during the winter break and apply for a new visa for the spring semester. Please contact Marie Rauturier or Gael Noyes regarding this matter.
- **WAIVER NOTICE:** By applying independently for your visa, you accept full responsibility for the application process. SU Abroad cannot work with the Italian Consulates on behalf of independent visa applicants. If you experience difficulty or errors with your visa, you must work directly with the Italian Consulate to have them solved. SU Abroad can provide advice and guidance, but is not liable or responsible for independent visa applicants.

Questions? We'll be happy to assist you. Main contacts:

Marie Rauturier, Visa Coordinator: 315-443-9428, mrauturi@syr.edu

Gael Noyes, Florence Admissions Counselor: 315-443-0252, gknoyes@syr.edu

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Make copies of all forms and documents for your personal records and reference.

Preliminary steps for Independent Visa Applicants

Before you begin, please note that you will need a valid passport with an expiration date no less than six (6) months after your program ends. If your passport does not comply with this requirement, you need to apply for a new one immediately using the expedited service.

Step 1. Determine which Italian Consulate you need to apply to

You may submit your application to the Consulate presiding over your permanent address or your campus address.

- US citizens: Go to www.ambwashingtondc.esteri.it/ambasciata_washington, and click on “Consulates in the USA” (under the Information and Services tab) to determine which Consulate presides over your county/state. Please note that **Honorary Vice Consulates** can accept your visa application. Consulate Correspondents cannot.
- **If your jurisdiction is Los Angeles**, stop now and contact SU Abroad. Their office mandates that students participating in Syracuse University programs submit their visa applications with the SU Abroad group submission.

STEP 2: Schedule an appointment

Review the Consulate’s website to determine if an appointment is necessary. Most consulates have an online appointment system. Make an appointment now for some time **no later than July 15, 2016**. Appointments fill up fast, so if you wait too long there will be no appointment available.

STEP 3: E-mail the date of your visa appointment

Email the details of your appointment to Marie Rauturier/Gael Noyes. Your email should specify:

- The consulate to which you are applying
- Your appointment date with the consulate

STEP 4: Review the consulate’s website

You need to ensure you have all of the documentation you need for your appointment. Follow the instructions for a Long Stay Student Visa. SU Abroad will provide you with enrollment letters for SU Abroad and SU Florence, which includes information on proof of lodging. We will also send you an insurance letter. Please note that it takes between 1 and 2 weeks to collect the documentation and prepare for your visa application appointment. Plan ahead!

STEP 5: Scan and email your visa and a copy of the stamped SU Florence letter

Email these materials to Gael Noyes. SU Abroad maintains electronic copies of these documents in case of loss or emergency. **Take the original letter with you to Italy** as you will need this for your Permesso di Soggiorno (permit of stay).

Visa Documents

Your consulate will require some or all of the documents listed below as part of your application. Please refer to the consulate website for a current and accurate list.

PRINT DOCUMENTS SINGLE-SIDED. COMPLETE IN BLACK INK AND CAPITAL LETTERS.

- Official Passport
 - Signed and valid for at least 6 months past the program end date.
- One photocopy of the ID page of your passport
- Long Stay Visa Application Form with photo attached
 - Go to consulate's website, click on "Visas" and download the Long Stay Visa Application form (over 90 days)
 - Refer to the enclosed SAMPLE when filling out the application form
 - Attach an official passport photo to the front page where designated
- Photocopy of your driver's license or state ID card, plus photocopies
- Photocopy of your F-1 or J-1 visa and a copy of your I-20 (international students)
- Photocopy of your university ID card
- Official university transcript (usually obtained through your university registrar)
- Enrollment verification letter from your university (usually obtained through your university registrar)
 - Letter must confirm status as a full-time student and anticipated graduation
- SU Abroad Enrollment letters (English and Italian)
 - Letters confirm the following:
 - admission into the program
 - housing accommodations
 - confirmation you will register for your Permesso di Soggiorno
 - confirmation you will purchase Italian National Health Insurance
 - We will mail your letters when you confirm the date of your visa appointment
 - You must bring both letters and photocopies to your appointment.
- Affidavit of Health Insurance Coverage -- use the blank form enclosed in this packet
 - Verifies that you will purchase Italian National Health Insurance upon arrival in Italy. All students obtain this through our program and the cost is included in the program fee). While the Italian insurance is helpful to have as a back-up, all students are mandated to carry their own health insurance policy for the semester.

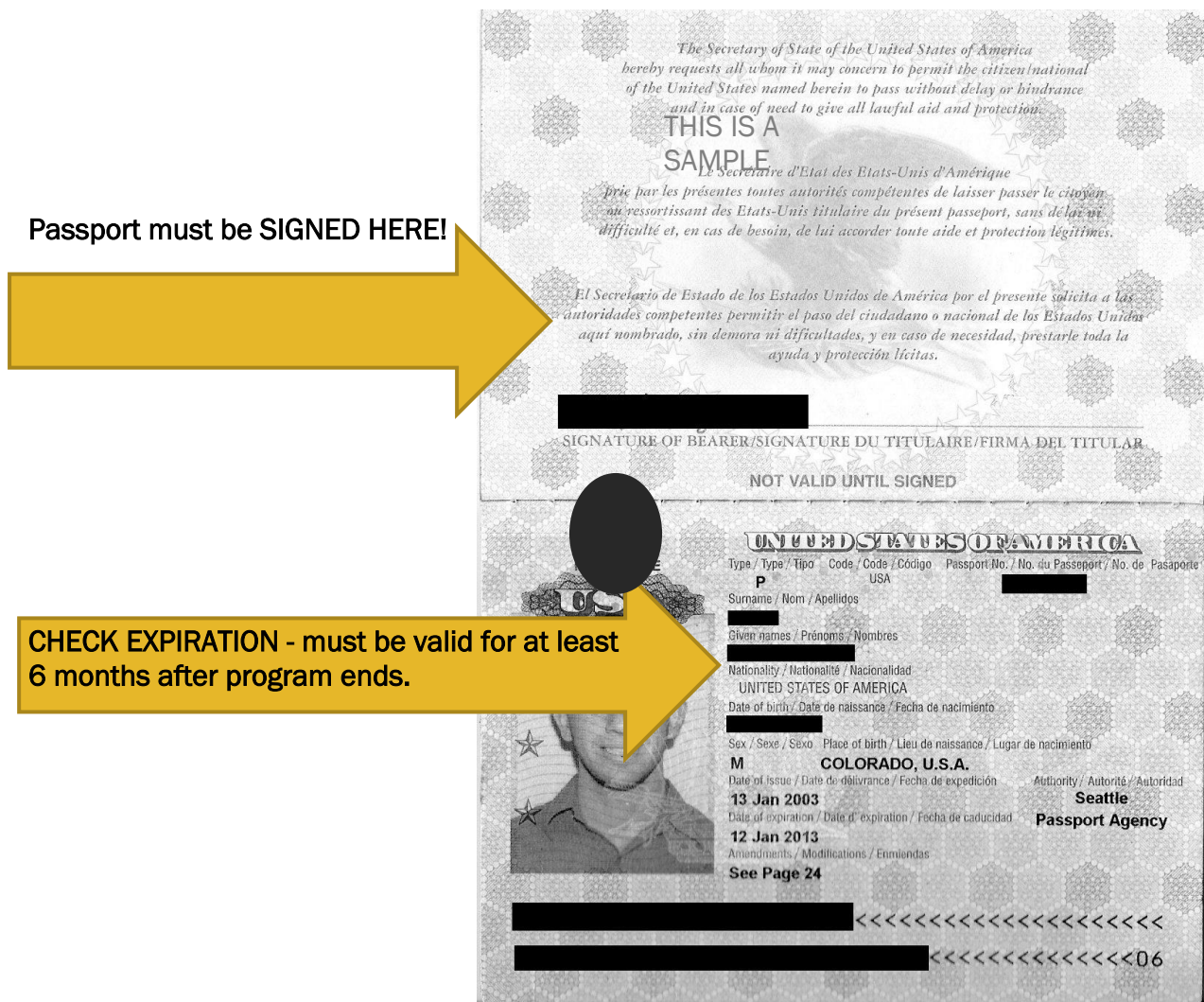
- Proof of health insurance coverage
 - you must show verification (policy number & expiration date) that you have purchased health insurance coverage for the duration of your semester
- Bank Documents (proof of financial means)
 - Formal letter from your bank confirming you have at least \$4,000 to \$6,500 in your bank account. For New York consulate, please make sure that you have at least \$6500 in your account and that your bank letter is in your name, and your name only.
 - Letter must be original, no faxes or photocopies
 - Affidavit of Support, if necessary
 - Please refer to the enclosed “Guidelines for Bank Documents” and the FAQ for specific instructions.
 - Credit card statement (New York consulate only). Please refer to the website for more information.
- Confirmed Flight Itinerary
 - Group flight travelers: request your confirmed itinerary from Advantage Travel (315-471-2222).
 - Independent travelers need to purchase a round trip ticket and bring a confirmed itinerary to their visa appointment.
 - There are restrictions dictating how long you can be in the EU beyond the official program dates. Please refer to the FAQ (“Flight Itineraries”) for specific information and book your travel accordingly.
- \$52-\$57 visa fee – usually only money orders and cashier’s checks accepted.
 - Check the consulate website for exact amounts and to whom you should make the check payable

Passport and photocopy of ID page

You must submit your **official passport** and a photocopy of the ID page (and of your US visa if applicable) with your visa application.

1. Your passport must be SIGNED
2. Your passport must be valid for at least six months after the program end date
3. Make 2 copies of your passport ID and keep one for your records. DO NOT submit your passport to the Italian consulate without making a photocopy for yourself first.

Photocopy your ID page just as you see below on an 8 ½ x 11 sheet of paper. Do not photocopy any other items onto the page.



Number of Days for Fall 2016 (question 25)

Question 25: Program	Number of Days
SU Florence Center (includes Studio Arts, Architecture, Engineering, Intensive Language, Florence Center & University of Florence (courses taught in English)	107 days
SU Florence Center (includes Studio Arts, Architecture, Engineering, Intensive Language, Florence Center & University of Florence (courses taught in English) + Greek Odyssey	118
Direct enrollment at University of Florence (courses taught in Italian)	113 days
Direct enrollment at University of Florence (courses taught in Italian) + Greek Odyssey	124

Program Dates for Fall 2016 (questions 29 and 30)

Question 29: Program	Arrival Date
Pre-Semester Seminar: The Greek Odyssey Arrive: August 19, 2016	Arrive August 19, 2016
All programs	Arrive August 30, 2016

Question 30: Program	Departure Date
SU Florence Center (includes Studio Arts, Architecture, Engineering, Intensive Language and University of Florence (courses taught in English)	Depart December 14, 2016
Direct enrollment at University of Florence (courses taught in Italian)	December 20, 2016



Consolato Generale d'Italia

SAMPLE

FOTOGRAFIA

LEAVE BLANK

1. Cognome /Surname (x) LAST NAME (must match passport)				Spazio riservato all'amministrazione	
2. Cognome alla nascita (cognome/i precedente/i) /Surname at birth (former family name(s)) (x) LEAVE BLANK					
3. Nome/i / First names (given name(s)) (x) FIRST and MIDDLE NAME (must match passport)					
4. Data di nascita (giorno-mese-anno) Date of birth (day/month/year) Date of birth - format: day/month/year (29/05/1991)		5. Luogo di nascita/Place of birth CITY and STATE of birth		7. Cittadinanza attuale/current nationality NATIONALITY (ex: USA, CHINESE) Cittadinanza alla nascita, se diversa Nationality at birth, if different If you were born a different nationality	
8. Sesso /Sex: select appropriate box <input type="checkbox"/> Maschile./Male..... <input type="checkbox"/> Femminile./Female.....		9. Stato civile/marital status..... select appropriate box <input type="checkbox"/> Non coniugato/a/.single <input type="checkbox"/> Separato/a /Separated <input type="checkbox"/> Vedovo/a /widow(er) <input type="checkbox"/> Altro (precisare) /Other (please, specify):..		Domanda presentata presso: <input type="checkbox"/> Ambasciata/Consolato <input type="checkbox"/> Centro comune <input type="checkbox"/> Fornitore di servizi <input type="checkbox"/> Intermediario commerciale <input type="checkbox"/> Altro	
10. Per i minori: cognome, nome, indirizzo (se diverso da quello del richiedente) e cittadinanza del titolare della potestà genitoriale/tutore legale/In case of minors: Surname, first name, address (if different from the applicant's) and nationality of parental authority/legal guardian..... LEAVE BLANK					
11. Numero d'identità nazionale, ove applicabile /./ national identity number, where applicable..... LEAVE BLANK					
12. Tipo di documento/type of passport: Select "Ordinary Passport" <input checked="" type="checkbox"/> Passaporto ordinario /Ordinary passport <input type="checkbox"/> Passaporto di servizio / Service passport <input type="checkbox"/> Passaporto speciale / Special passport <input type="checkbox"/> Documento di viaggio di altro tipo (precisare) /Other travel document (please, specify) <input type="checkbox"/> Passaporto diplomatico/ Diplomatic passport <input type="checkbox"/> Passaporto ufficiale / Official passport					
13. Numero del documento di viaggio/Number of travel document..... Passport Number		14. Data di rilascio./Date of issue..... Date issued		15. Valido fino al /Valid until Date of expiration	
17. Indirizzo del domicilio e indirizzo di posta elettronica del richiedente Applicant's home address and e-mail address Your PERMANENT ADDRESS and EMAIL ADDRESS		16. Rilasciato da/ Issued by..... COUNTRY of Issue (ex: USA, CHINA)		Documenti giustificativi: <input type="checkbox"/> Documento di viaggio <input type="checkbox"/> Mezzi di sussistenza <input type="checkbox"/> Invito <input type="checkbox"/> Mezzi di trasporto <input type="checkbox"/> Assicurazione sanitaria di viaggio <input type="checkbox"/> Altro	
18. Residenza in un paese diverso dal paese di cittadinanza attuale / Residence in a country other than the country of current nationality <input checked="" type="checkbox"/> No Select "No" unless applicable <input type="checkbox"/> Sì. Titolo di soggiorno o equivalente/ Yes, Residence permit or equivalent n. Valid until					
19. Occupazione attuale / ... Current occupation..... STUDENT					
20. Datore di lavoro, indirizzo e numero di telefono. Per gli studenti nome e indirizzo dell'istituto di insegnamento/Employer and employer's address and telephone number. For students, name and address of school List your HOME UNIVERSITY name and its ADDRESS					
21. Scopo del viaggio /Main purpose(s) of the journey Select "Study" only <input type="checkbox"/> Ricongiungimento Familiare/Familiare al Seguito / Family reunion visa <input type="checkbox"/> Motivi Religiosi/ Religious reasons <input type="checkbox"/> Sport/Sport <input type="checkbox"/> Missione./Mission..... <input type="checkbox"/> Diplomatic/Diplomatic <input type="checkbox"/> Cure Mediche./ Medical reasons <input checked="" type="checkbox"/> Studio/Study <input type="checkbox"/> Adozione/Adoption <input type="checkbox"/> Lavoro subordinato/Subordinate work <input type="checkbox"/> Lavoro autonomo /self-employment <input type="checkbox"/> Di altro tipo / Other (please, specify).....					

(x) Alle caselle da 1 a 3 le informazioni vanno inserite come indicate nel documento di viaggio. Questions 1 through 3 must be completed according to the information listed in the travel document.

22. Città di destinazione/City of destination FLORENCE, ITALY	23. Eventuale Stato membro di primo ingresso/Member State of first entry (if applicable) ITALY	
24. Numero di ingressi richiesti/Number of entries <input type="checkbox"/> Uno/..... <input type="checkbox"/> Due/..... <input checked="" type="checkbox"/> Multipli/.....	25. Durata del soggiorno. Indicare il numero dei giorni (max. 365gg.) / Duration of the intended stay (maximum 365 days) PLEASE REFER TO DATES IN PACKET (ex: 107 days)	
26. Visti Schengen rilasciati negli ultimi tre anni / Schengen Visas issued during the past three years <input checked="" type="checkbox"/> No Select "No" unless you have another Schengen Visa in your passport <input type="checkbox"/> Sì. Data/e di validità / Yes, date of validity from.....to.....		
27. Impronte digitali rilevate in precedenza ai fini della presentazione di una domanda di visto Schengen/ Fingerprints collected previously for the purpose of applying for a Schengen Visa. <input checked="" type="checkbox"/> No. <input type="checkbox"/> Sì/. Yes Select "No" unless applicable Data, se nota/ Date if known		
28. Numero del Nullaosta rilasciato ai fini del Ricongiungimento Familiare/Familiare al Seguito/Lavoro Subordinato (solo ove richiesto dalla normativa disciplinante il tipo di visto richiesto)/ "Nulla Osta" ref. n. LEAVE BLANK for "Family Reunion Visa" / Subordinate work (only if requested by the law regarding the specific type of visa requested) Rilasciato dal SUI di/Issued by the "Sportello Unico per l'Immigrazione" of (specify the city)..... LEAVE BLANK Valida dal/..Valid from..... LEAVE BLANK al/to..... LEAVE BLANK		
29. Data di arrivo prevista nell'area Schengen Intended date of arrival in the Schengen area REFER TO DATES IN PACKET MUST MATCH FLIGHT ITINERARY	30. Data di partenza prevista dall'area Schengen (solo per i visti aventi durata compresa tra i 91 ed i 364gg.) Intended date of departure from the Schengen Area (only for visa of 91 days and up to 364 days) REFER TO DATES IN PACKET MUST MATCH FLIGHT ITINERARY	
31. Cognome e nome della persona che ha richiesto il ricongiungimento o del datore di lavoro. Altrimenti, nel caso di visto per Adozione, Motivi religiosi, Cure Mediche, Sport, Studio, Missione: indirizzo di recapito in Italia. Surname and name of the person in Italy who applied for "family reunion" or surname and name of the employer in Italy LEAVE BLANK For Adoption, Religious reasons, Medical reasons, Sport, Study, Mission, please give the address in Italy: LEAVE BLANK		
Indirizzo e indirizzo di posta elettronica della o delle persone che chiedono il ricongiungimento o del datore di lavoro Address and email address of the person(s) who applied for Family reunion or of the employer LEAVE BLANK	Telefono e fax della o delle persone che chiedono il ricongiungimento o del datore di lavoro./Telephone or fax number of the person(s) who applied for Family reunion or of the employer LEAVE BLANK	
32. Nome e indirizzo dell'impresa/organizzazione che invita /Name and address of host company/organization SYRACUSE UNIVERSITY IN FLORENCE PIAZZA SAVONAROLA, 15 FLORENCE I-50132	Telefono e fax dell'impresa/organizzazione . Telephone and fax of the Company/ organization (39) 055-5031-31 PHONE (39) 055-5000-31 FAX	
Cognome, nome, indirizzo, telefono, fax e indirizzo di posta elettronica della persona di contatto presso l'impresa/ organizzazione / Surname, first name, address, telephone, fax and email address of contact person in Company/organisation SASA PERUGINI - DIRECTOR SU FLORENCE PERUGINI@SYR.EDU PIAZZA SAVONAROLA, 15, FLORENCE I-50132		
33. Le spese di viaggio e di soggiorno del richiedente sono a carico/ Cost of travelling and living during the applicant's stay is covered by: Check the following boxes indicated and write in the following:		
<input checked="" type="checkbox"/> del richiedente/Myself Mezzi di sussistenza/means of support <input checked="" type="checkbox"/> Contanti/cash <input type="checkbox"/> Traveller's cheque <input checked="" type="checkbox"/> Carte di credito/credit card <input type="checkbox"/> Alloggio prepagato / prepaid accomodation <input checked="" type="checkbox"/> Trasporto prepagato/prepaid transport <input type="checkbox"/> Altro (precisare/Other) INDICAZIONE NON NECESSARIA NEL CASO DI VISTO PER: Ricongiungimento Familiare, Familiare al Seguito, Lavoro Subordinato/Autonoma, Missione, Diplomatico, Adozione. INFORMATION NOT NECESSARY IF APPLYING FOR THE FOLLOWING TYPES OF VISAS: Family reunion/Subordinate work /self- employment/Mission/Diplomatic/Adoption	<input checked="" type="checkbox"/> del promotore(ospite, impresa, organizzazione), precisare/a sponsor(host,company,organisation),please specify SYRACUSE UNIVERSITY di cui alle caselle 31 o 32 / referred to in question n. 31 or 32 <input type="checkbox"/> altro(precisare/Other (please, specify) Mezzi di sussistenza/Menas of support <input type="checkbox"/> Contanti/cash <input checked="" type="checkbox"/> Alloggio fornito / Accomodation provided <input type="checkbox"/> Tutte le spese coperte durante il soggiorno/ All expenses covered during the stay <input type="checkbox"/> Trasporto prepagato/prepaid transport <input type="checkbox"/> Altro (precisare)/ Other (please specify)	

34. Dati anagrafici del familiare che è cittadino UE, SEE o CH / Personal data of the family member who is an EU, EEA or CH citizen ONLY IF APPLICABLE, fill in this section (34 and 35)		
Cognome /Surname		Nome/i / First name(s)
Data di nascita / Date of birth	Cittadinanza /nationality	Numero del documento di viaggio o della carta d'identità Number of travel document or ID card
35. Vincolo familiare con un cittadino UE, SEE o CH / Family relationship with an EU, EEA or CH citizen <input type="checkbox"/> coniuge/spouse <input type="checkbox"/> figlio/a /son/daughter <input type="checkbox"/> altri discendenti diretti/ other descendants <input type="checkbox"/> ascendente a carico / dependent ascendant		
36. Luogo e data / Place and date CITY, STATE, DATE of signature		37. Firma (per i minori, firma del titolare della potestà genitoriale/tutore legale)/ Signature (for minors, signature of parental authority/legal guardian) STUDENT SIGNATURE

Sono a conoscenza del fatto che il rifiuto del visto non dà luogo al rimborso dei diritti pagati per la trattazione della pratica

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

LEAVE BLANK

Sono informato/a del fatto e accetto che la raccolta dei dati richiesti in questo modulo, la mia fotografia e, se del caso, la rilevazione delle mie impronte digitali sono obbligatorie per l'esame della domanda di visto e che i miei dati anagrafici figuranti nel presente modulo di domanda di visto, così come le mie impronte digitali e la mia fotografia, saranno comunicati alle competenti autorità italiane e trattati dalle stesse ai fini dell'adozione di una decisione in merito alla mia domanda.

Tali dati, così come i dati riguardanti la decisione relativa alla mia domanda o un'eventuale decisione di annullamento o revoca di un visto rilasciato, saranno inseriti e conservati nel sistema informatico della Rappresentanza diplomatico consolare e del Ministero degli Affari Esteri. Tali dati saranno accessibili alle autorità nazionali competenti per i visti. Inoltre, saranno accessibili alle autorità Schengen competenti ai fini dei controlli sui visti alle frontiere esterne, alle autorità degli Stati membri competenti in materia di immigrazione e di asilo (ai fini della verifica dell'adempimento delle condizioni di ingresso, soggiorno e residenza regolari nel territorio degli Stati membri e dell'identificazione delle persone che non soddisfano, o non soddisfano più, queste condizioni), alle autorità degli Stati membri competenti ai fini dell'esame di una domanda di asilo. A determinate condizioni, i dati saranno anche accessibili alle autorità designate degli Stati membri e a Europol ai fini della prevenzione, dell'individuazione e dell'investigazione di reati di terrorismo e altri reati gravi.

Sono informato/a del mio diritto di ottenere la notifica dei dati relativi alla mia persona registrati nel sistema informatico e del diritto di chiedere che i dati inesatti relativi alla mia persona vengano rettificati e che quelli relativi alla mia persona trattati illecitamente vengano cancellati. Su mia richiesta espressa, l'autorità che esamina la domanda mi informerà su come esercitare il mio diritto a verificare i miei dati anagrafici e a rettificarli o sopprimerli, così come delle vie di ricorso previste a tale riguardo dalla legislazione nazionale.

L'autorità di controllo nazionale dei dati è il Garante per la Protezione dei Dati Personali.

Dichiaro che tutti i dati da me forniti sono completi ed esatti. Sono consapevole che le dichiarazioni false comporteranno il respingimento della mia domanda o l'annullamento del visto già concesso e comporteranno la richiesta di avvio di azioni giudiziarie da parte della Rappresentanza ai sensi della legislazione dello Stato (articolo 331 c.p.p.).

La mera concessione del visto non dà diritto ad alcun tipo di risarcimento qualora io non soddisfi le condizioni previste dall'articolo 5, paragrafo 1 del Regolamento (UE) n. 562/2006 (Codice Frontiere Schengen) e dell'articolo 4 del D.Lgs. 286/98 e per tali motivi mi venga rifiutato l'ingresso.

I am aware of and consent to the following: the collection of the data required by this application form, submission 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 appears on the visa application form, as well as my fingerprints and my photograph will be supplied to the relevant Italian Authorities and processed by these Authorities for the purposes of a decision on my visa application.

Such data as well as data concerning the decision regarding my application or a decision whether to annul or revoke a visa issued will be entered into and stored in the Visa Information System of the diplomatic/consular mission and the Ministry of Foreign Affairs. Such data will be accessible to the National Visa Authorities. Moreover, such data will be accessible to the Schengen Authorities competent for carrying out checks on visas at external borders, to the 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 of the Member States are fulfilled and of identifying persons who do not or who no longer fulfill these conditions) to the Member States authorities competent for examining an asylum application. Under certain conditions the data will also be 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 the notification of the data relating to me recorded in the Visa Information System and to request that the data relating to me which is inaccurate be corrected and that the data relating to me unlawfully processed 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 it corrected or deleted, including the related appeal procedures according to the National Law. The competent authority in charge for personal data is "Garante per la protezione dei dati personali".

I declare that to the best of my knowledge all the information supplied by me is correct and complete. 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 National Law, with proceedings initiated by the Embassy/Consulate of Italy which deals with the application (Article 331 Penal Code).

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 (EC) No 562/2006 (Schengen Borders Code) and Article 4 of the Decree no. 286/98 and I am therefore refused entry.

ANNOTAZIONI/NOTES (riservato all'Ufficio/ for office use only)

LEAVE WHOLE AREA BLANK

Luogo e data / Place and date.....

CITY, STATE, DATE of signature

Firma (per i minori, firma del titolare della potestà genitoriale/ tutore legale) /Signature (for minors, signature of parental authority/legal guardian)
.....

STUDENT SIGNATURE

Money Order

Applicants are required to pay a processing fee in the form of a personal money order of \$54-\$56. Please check the exact amount on your consulate's website. Make money order out to **Consulate General of Italy in [City] and use the address of the consulate.**

Please make sure you write your name, home address and phone number on your money order. You can purchase one at a U.S. post office, bank, or the offices of Money Gram, Western Union or Currency Exchange. Some pharmacies may also sell money orders. **Any alteration to the money order (i.e. Whiteout) will render it unacceptable.**

UNITED STATES POSTAL SERVICE® **POSTAL MONEY ORDER** 15-800 000

SERIAL NUMBER: 0101010100 YEAR, MONTH, DAY: [DATE] POST OFFICE: 555555 U.S. DOLLARS AND CENTS: [CHECK THE AMOUNT]

AMOUNT: ONE HUNDRED DOLLARS & 00¢ *****

PAY TO: **CONSULATE GENERAL OF ITALY** NEGOTIABLE ONLY IN THE U.S. AND POSSESSIONS
SEE REVERSE WARNING

ADDRESS: **CONSULATE ADDRESS** FROM: **YOUR NAME** CLERK: 0011

CITY STATE ZIPCODE ADDRESS: **YOUR ADDRESS**

CASHED NO. OR USED FOR: **ITALIAN VISA PROCESS** **YOUR PHONE NUMBER**

000000000000 000000000000

Affidavit of Health Insurance Coverage

As part of the visa process, the Italian consulate requires that all students will purchase an insurance policy with I.N.A ASSITALIA for the duration of their stay as a student in Italy.

This insurance only covers emergency care and in itself is not enough medical insurance for a student for the semester (students should definitely have their own additional insurance for other medical needs and for any travel outside Italy).

However, it does meet the consulate's insurance requirement and SU Abroad will purchase this insurance for every student once they arrive in Florence. Therefore, please complete the Affidavit of Health Insurance Coverage form as part of the visa process to fulfil this part of the required visa documentation.

What is a Notary?

You will notice a few documents require notarization. A notary is a person authorized to perform legal formalities; in this case, authorization of a signature on an official document. This tells the consulate that it has been legally confirmed that YOU signed the document before him/her. You can find notaries at most banks. SU Abroad does not have an acting notary.

ITALIAN STUDENT VISA

AFFIDAVIT FOR HEALTH INSURANCE COVERAGE

I, *(first, middle, last name)* _____

born in *(town/state)* _____ **on** *(day-month-year)* _____

residing at *(permanent address)* _____

Phone number (area code-number) _____

BEING FIRST DULY SWORN ON OATH, DEPOSE AND SAY:

- That within eight days of my arrival in Italy I will report to the Italian QUESTURA for the issuance of my PERMESSO DI SOGGIORNO (residence permit) as requested by the Italian Government of all foreigners residing in Italy for an extended period of time
- That prior to appearing at the Questura, I will have purchased a policy with I.N.A. ASSITALIA, Via del Tritone 181, Rome - Bank account n.7127003 - which can be purchased at any Post Office upon arrival in Italy or with any other Italian insurance company of my choice,
- That the above mentioned coverage will be for my entire stay in Italy and will be granted without any sort of limitation and deduction.

Place and date: _____
(Signature of the student)

SIGNATURE MUST BE NOTARIZED BY NOTARY PUBLIC

SIGNED BEFORE ME ON _____

Signature of notary public _____

Seal of the notary public

Guidelines for Bank Documents

Italian Visa law mandates that students must have a specific amount of available funds on an **US account** in order to be issued a student visa. Please note that SU Abroad does not have the ability to waive/alter this requirement. All students must provide bank documentation as part of their visa application.

Amount required: \$35 per person on the account per day abroad, which is approximately:

- \$4000 (semester students) New York Consulate only - \$6500 \$50 per day
- \$8000 (academic year)
- \$12000 (Fine Arts Graduate students)

If you do not currently have the required funds in your account, refer to the “Bank Documents” section of the FAQ and contact Gael Noyes if you need further clarification.

Depending on the consulate, students may submit bank documentation from a parent or guardian’s bank account. Students who do so must also submit a notarized Affidavit of Support, completed by the parent or guardian (account holder). A blank Affidavit of Support is enclosed in this packet for you to use.

Sample Text for Bank Documents

Some Consulates require a formal letter while others accept a bank statement letter.

- Double check the Consulate’s website to confirm!
- SU Abroad advises you to bring a bank letter as they are accepted by all consulates

Bank statements must clearly show the bank logo, your name and the amount of funds present in the account. An online statement is acceptable provided it has these items.

Bank letters must confirm that you are the account holder, and that the specified funds are present in your account at the time the letter is generated. If you choose to submit the bank letter, please note the following:

- Letters must be on bank letterhead & must have a signature of a bank representative. Form letters with electronic signatures (such as ones provided by HSBC and Bank of America) are acceptable
- Letters must be originals, no faxes or photocopies
- Sample text is provided below. Your bank may deviate from the suggested format as long as the primary information requested is included.

For the New York consulate only: the consulate is asking for specific requirements:

- The bank letter should be at your name, and at your name only (no joint account, and no affidavit of support accepted)
- It needs to show at least \$50 per day abroad
- You will also need to provide a credit card statement showing your credit limit.

For more information, please go to:

http://www.consnewyork.esteri.it/consolato_newyork/en/i_servizi/per_chi_si_reca_in_italia/studenti.html

United States Bank of Syracuse



123 Main Street
Syracuse, NY 13210

September 20, 2015

To The Honorable Italian Consulate General:

This letter certifies that the title of the following accounts reflects [your name here] as an account holder.

Account Type	Account No.	Amount *	Date Opened
Checking	ends in xxxx	\$4,245.36	01/01/2000
Savings	ends in xxxx	In excess of \$8,000.00	01/01/2000

The above mentioned balance(s) is accurate as of [today's date].

Sincerely,
John Doe
Bank Teller and Customer Service Representative
(315) 555-2252



ITALIAN STUDENT VISA AFFIDAVIT OF SUPPORT

Required ONLY if bank letter is not in student's own name. Must be completed by the parent/guardian of the visa applicant and must accompany parent/ guardian's official bank documents.

To Whom It May Concern:

I, _____, born in _____
(name of parent/guardian) (city, state, country)

on _____, being duly sworn on oath, depose and say:
(date of birth)

- That the visa applicant, _____, born in _____
(name of student visa applicant) (city, state, country), on _____,
(date of birth)

is my: Son/Daughter/Dependent *(circle one)*.

- That the applicant intends to pursue his/her education by attending Syracuse University in Florence between the dates of _____ and _____.
(date of arrival) (date of departure)
- That I have sufficient income/assets to responsibly cover the visa applicant's expenses during his/her entire stay in Italy AS WELL AS any and all other unforeseen expenses the applicant may incur during his/her time in Italy.
- That I, the affiant, will pay for the applicant's expenses as outlined above. As proof of my ability to do so, I attach original bank documentation, stating that I have at least \$ _____ in my account. *(\$4,000 for semester abroad, \$8,000 for academic year, or \$12,000 for FLA Graduate students)*

Further, Affiant Sayeth Not.

Affiant Signature: _____

Place and Date: _____

Notary Public Signature: _____

Sworn and Subscribed to before me on: _____

<Seal of Notary Public>


Confirmed Round-Trip Flight Itinerary

To obtain a visa, students must provide proof of exit from the country. You must provide confirmation that you have purchased a round-trip ticket to Italy and out of the European Union (Schengen area). Please print out a copy of the confirmation the airline, agent, or service sends you once the booking is complete. This must include all legs of your flight and confirmation that you purchased the flight (a price).

If you are traveling on the Group Flight and/or booking your flight through Advantage Travel, please inform Gael Noyes via email or phone and Advantage Travel will send SU Abroad all confirmed itineraries. Please ensure that you purchase this flight before the visa deadline. If you have questions regarding group flights, call Advantage Travel (315-471-2222).

Please be sure to research any laws or guidelines prior to scheduling outside travel before, during, or after your program.

International students, make sure your travel dates match your start and end program dates. Do not enter Italy before your visa period begins. It is your responsibility to check to see if you can stay after the visa expires.

Syracuse Airways

Your Reservations

You're confirmed!

Date issued: Tuesday, September 02, 2014

Confirmation code:
BDPQ758

Trip details: [Download to calendar](#)

DEPART

JFK → FRA New York City to Frankfurt (January 11, 2015)
Flight: SA3796 Travel Time: 7h 25m
Depart: 11:00am Aircraft: 747
Arrive: 1:00pm Cabin: Coach
Meal: Lunch Seat: 25F

2 hour layover FRA


FRA → FLR Frankfurt to Florence (January 11, 2015)
Depart: 3:00pm Travel Time: 3h 17m
Flight: LH 2938 Aircraft: 737
Arrive: 6:17pm Cabin: Coach
Meal: -- Seat: 17C

RETURN

FLR → FRA Florence to Frankfurt (April 30, 2015)
Flight: LH8473 Travel Time: 3h 00m
Depart: 9:00am Aircraft: 737
Arrive: 12:00pm Cabin: Coach
Meal: -- Seat: 17D

3 hour layover FRA

Scan barcode for boarding pass

Syracuse Airways

Your Reservations

FRA → JFK Frankfurt to New York City (April 30, 2015)
Flight: SA2846 Travel Time: 7h 45m
Depart: 3:00pm Aircraft: 747
Arrive: 4:45pm Cabin: Coach
Meal: Dinner Seat: 30C

Total travel cost
(1 passenger)

Fare	Adult
JFK to FLR	\$650
FLR to JFK	\$700
Taxes and fees	\$80
Total	\$1,430

Charged to Jenny C. Doe
*****7328 (Visa)

You paid \$1,430

What is the Schengen Area?

The Schengen Area includes the countries listed below. You will be able to travel freely in these countries within the dates of your program and/or visa.

- Austria
- Belgium
- Czech Republic
- Denmark
- Estonia
- Finland
- Germany
- Greece
- Hungary
- Iceland (not EU)
- Italy
- Latvia
- Liechtenstein (not EU)
- Lithuania
- Luxembourg
- Malta
- Netherlands
- Norway (not EU)
- Poland
- Portugal
- Slovakia
- Slovenia
- Spain
- Sweden
- Switzerland (not EU)

