# Italian Student Visa Packet

### Consulate General of Italy in Miami

This consulate is for students whose zip codes fall under the jurisdiction of the Consulate General of Italy in Miami. Your assignment is based on your home or school zip code from your Syracuse Abroad application.

### Before you begin:

- Ensure you have a passport valid at least 6 months after your program ends.
- Ensure you will <u>not</u> need your passport before the program starts. If you will need your passport for international travel before the start of the program, we cannot guarantee you will receive your visa in time and you may need to apply independently. Contact us immediately to verify your eligibility for the group submission process.
- Visa application due date: Friday, May 1, 2020
- Main contact:
  - Courtney Eppel, Italy Visa Coordinator 315-443-9428, <u>syrflorence@syr.edu</u>
- International students may apply through the Miami jurisdiction if your home school is in Florida, Georgia, South Carolina, Alabama, Mississippi, Puerto Rico, U.S. or British Virgin Islands, Cayman Islands, Turks & Caicos, Bahamas or the islands of Saba, St. Maarten and St. Eustatius. <u>Please submit a copy of your I-20 or Green Card with your other paperwork.</u> If you are on a F1-visa, make sure it is valid at least 3 months after your Florence program ends.
- Students with European Union citizenship traveling with their EU passport do not need a visa.
- Full year students: If there is any chance that you may decide to stay a second semester 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 break and apply for a new visa for the second semester. <u>Please contact us if you are planning on staying for two semesters</u>.

### Mail or bring completed visa documents to:

Syracuse Abroad ATTN: Italy Visas 106 Walnut Place Syracuse, NY 13244

### **Rules for Submitting Your Italian Visa Application:**

- Make sure your passport is signed!
- Respect the deadline!

All documents must be received by the deadline, sent in one package. If you miss the deadline, we can't guarantee you to be part of the group submission and you may have to submit your application independently.

- Print all documents single-sided only.
- Do not use staples, paper clips, glue or tape on any portion of your application.
- All forms with handwritten sections must be legible and written in black or blue ink.
- All photos, photocopies and scans must be clear and easy to read.
- You may print and photocopy in black and white or color.
- You may use the forms in this packet or download them from your <u>OrangeAbroad</u>
   <u>Portal</u>.
- Make copies of all documents for your records and reference.
  - Note: Especially keep a copy of the ID page of your passport.
- Send applications through a courier service (FedEx or UPS) as the US Postal Service (USPS) may take up to two days longer to reach the Syracuse Abroad office.

## IMPORTANT: Please do <u>not</u>, under any circumstance, contact the consulate regarding your visa application.

As you are part of our group submission, the consulate requires that all contact regarding the group submission must come from Syracuse Abroad.

## **Checklist of Required Visa Documents**

These documents are mandatory, no exceptions will be made.

The following documents must be mailed or brought to Syracuse Abroad:

- □ 1. Official **SIGNED** passport
- □ 2. One official passport photo with your name written on back
- □ 3. **Notarized** photocopy of your driver's license or state ID
  - International students: copy of your I-20 form or Green Card (both sides)
- □ 4. Italian visa application form (with 3 signatures)
- □ 5. Official bank letter or statement and (if applicable) **notarized** affidavit of support
- □ 6. Pre-Paid shipping label (for us to ship your passport back to you)
- □ 7. Enrollment verification letter from your home university (non-SU students only)
- □ 8. Visa fee- money order made out to Consulate General of Italy in Miami
- □ 9. Copy of round-trip flight itinerary (**Note:** if you are traveling on the group flight, Syracuse Abroad will get this for you)
- □ 10. Visa application authorization form

### Remember to keep a copy of all documents for your records! Note: 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.

### 1. Your Official Passport

The consulate requires your official passport in order to place the visa inside as a permanent page. This visa confirms the official approval of your stay in your host country and is required for any student not of European Union citizenship.

If you do not have a passport or your passport will expire within six months of your program ending, apply for or renew your passport immediately!

Syracuse Abroad strongly recommends that you have your passport application expedited to ensure your new passport arrives in time to apply for your visa with the group. If you do not use the expedited service and your passport does not arrive until after the deadline, we cannot guaranty that you will be able to be part of the group submission.

Applications for passports and passport renewal can be found online at <u>Travel.State.Gov</u>.

Once you have applied for your passport, immediately begin working on the remainder of your visa application and submit it to Syracuse Abroad by the published deadline. Do not fill out ANY passport information, we will fill that in when your new passport arrives. Add a note with your submitted documents detailing the date you submitted your passport application. Once you receive your new passport, do not forget to sign it before sending it to Syracuse Abroad.

### 2. One Official Passport Photo



The consulate requires a separate photo to create your visa. This does not need to be the same photo in your passport. You may have official passport photos taken at various copy centers, drugstores and other stores (*i.e.*, CVS) for a fee. The photo should feature only you in front of a white background. **You may not take the photo yourself.** Only send one photo with your visa application, but keep the extra photos and bring them with you to Italy. Please write your name clearly on the back of the photo. Please see the sample at left.

### 3. Notarized Photocopy of Your Driver's License

Your driver's license or state ID confirms your residence in the United States and/or your residence within the consulate's jurisdiction. When photocopying your driver's license card please follow these steps:

Photocopy your driver's license or state ID onto the template on the following page.
 \*DO NOT SIGN YET\*

- Take the sheet to a notary and have the document notarized (see note on page 3)
- Send the original to Syracuse Abroad (no copy of the stamp will be accepted).

Copy your driver's license here	
Place and date	Signature of the student
Signature must be notarized by a pu	blic notary:
	- 
Signature of the public notary:	
Seal of the public notary	
_	tary Public in and for said state, personally appeared this individual, nce to be the individual whose name is subscribed to the within
instrument and acknowledged to me that he/sl	he executed the same in her capacity, and that by her signature on the ehalf of which the individual, acted, executed the instrument.
	p 800.235.3472   f 315.443.4593   e <u>suabroad@syr.edu</u>   suabroad.syr.edu 5

### 4. Visa Application Form

You should have downloaded a blank application when you downloaded this packet. If you did not, please <u>click</u> <u>here</u> or in your log into your <u>OrangeAbroad Portal</u>.

Please fill out each page exactly as it is filled out on the sample (pages 7-10 in this packet) with your appropriate information. There are three signatures required on this application and you must complete all for the application to be complete.

Please refer to this page when answering questions 25, 29 and 30 of your visa application.

#### Number of Days for Fall 20 (question 25)

Question 25: Program	Number of Days
SU Florence Center	
SU Florence Center: Studio Arts, Architecture, Design, Engineering	
SU Florence Center & Intensive Language Program at University of Florence	
SU Florence Center & Direct Enrollment at University of Florence	<mark>108 days</mark>
Signature Seminar (with any program above)	<mark>117 days</mark>

#### Program Dates for Fall 20 (questions 29 and 30)

Question 29: Program	Arrival Date
Signature Seminar- Borders in Flux or Empires of Exchange	Arrive 23 August, 2020
SU Florence Center	
SU Florence Center: Studio Arts, Architecture, Design, Engineering	
SU Florence Center & Intensive Language Program at University of	
Florence	
SU Florence Center & Direct Enrollment at University of Florence	Arrive 1 September, 2020

Question 30: Program	Departure Date
All programs	Depart 17 December, 2020







#### Miami



1. Cognome /Surname (x)	[ <u></u>	
LAST NAME (must match	Spazio riservato	
2. Cognome alla nascita (cognome/i preceden	all'amministrazione	
3. Nome/i / First names (given name(s)) (x)		
FIRST and MIDDLE NAM	F (must match passport)	Data della domanda:
4. Data di nascita (giorno-mese-anno)	5. Luogo di nascita/Place of birth 7. Cittadinanza attuale/current nationality	Numero della domanda di
Date of birth (day/month/year	CITY and STATE of birth NATIONALITY (ex: USA, CHINESE)	visto:
DATE OF BIRTH- format: day/month/year (29/05/1991)	6. Stato di nascita /Country of birth Nationality at birth.if different	Domanda presentata presso:
	COUNTRY of birth If you were born a different nationality	Ambasciata/Consolato
8. Sesso /Sex:	9. Stato civile/.marital status	Centro comune
□Maschile/.Male	□Non coniugato/a/.single □ Coniugato/a/Married	Fornitore di servizi
Femminile/.Female	Separato/a /Separated Divorziato/a /Divorced	commerciale
select appropriate box	Vedovo/a /widow(er)	Altro
	Altro (precisare) /Other (please, specify):	
10.Per i minori: cognome, nome, indirizzo (s	e diverso da quello del richiedente) e cittadinanza del titolare della potestà ırname, first name <u>, address (if different from</u> the applicant's) and nationality of	Nome:
parental authority/legal guardian	LEAVE BLANK	Responsabile della pratica:
	bile // national identity number, where applicable LEAVE BLANK	Nome di chi ha ricevuto la
		pratica allo sportello:
12. Tipo di documento/type of passport:	SELECT "ORDINARY PASSPORT"	
Passaporto ordinario /Ordinary passpo	Documenti giustificativi:	
Passaporto di servizio / Service passpor	Documento di viaggio	
Passaporto speciale / Special passport     Documento di viaggio di altro tipo (preci	Mezzi di sussistenza	
13. Numero del documento di 14. Data di n	☐Invito ☐Mezzi di trasporto	
viaggio/Number of travel issue	Assicurazione sanitaria di	
document	viaggio	
PASSPORT NUMBER           17. Indirizzo del domicilio e indirizzo di postanti	Altro	
Applicant's home address and e-mail addre	Decisione relativa al visto:	
Your PERMANENT ADDRES	Rifiutato	
nationality Select "NO" unless applicable	Rifiutato per segnalazione SIS non	
XNO	cancellabile.	
Sì. Titolo di soggiorno o equivalente/ Ye 19. Occupazione attuale / Current occupat	Pratica Sospesa	
	Rilasciato	
20. Datore di lavoro, indirizzo e numero di	Tipo di visto:	
insegnamento/Employer and employer's add	D	
21. Scopo del viaggio /Main purpose(s) of the		
	dal	
Ricongiungimento Familiare/Familiare a	al Numero di ingressi:	
Motivi Religiosi/ Religious reasons	8	
Cure Mediche./ Medical reasons		
Lavoro autonomo /self-employment	🗖 Multipli	
	1	

(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 da di mani and Cita de di anti-attina					
	ventuale Stato membro di primo ingresso/Member of first entry (if applicable)				
24. Numero di ingressi richiesti/Number of entries 25. D	urata del soggiorno. Indicare il numero dei giorni (max.				
	2.) / Duration of the intended stav (maximum 365 days) EASE REFER TO DATES IN PACKET (ex: 107 days)				
26. Visti Schengen rilasciati negli ultimi tre anni / Schengen V	isas issued during the past three years				
$\chi$ No Select "NO" unless you have another Schengen Visa in your passport					
□Sì. Data/e di validità / Yes, date of validity from					
27. Impronte digitali rilevate in precedenza ai fini della pres					
Fingerprints collected previously for the purpose of applyin Select "NO" unless	g for a schengen visa.				
Data, se nota/ Date if known applicable					
28. Numero del Nullaosta rilasciato ai fini del Ricongiungim (solo ove richiesto dalla normativa disciplinante il tipo di vist	ento Familiare/Familiare al Seguito/Lavoro Subordinato o richiesto)/   FAVF A    B  ANK				
(solo ove richiesto dalla normativa disciplinante il tipo di vist "Nulla Osta" ref. n	union 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'In	migrazione" of (specify the city)				
Valida dal/Valid from	al/to				
29. Data di arrivo prevista nell'area Schengen	30. Data di partenza prevista dall'area Schengen (solo				
Intended date of arrival in the Schengen area	per i visti aventi durata compresa tra i 91 ed i 364gg.)				
REFER TO DATES IN PACKET- MUST MATCH	Intended date of departure from the Schengen Area (only for visa of 91 days and up to 364 days)				
FLIGHT ITINERARY (day/month/year)	REFER TO DATES IN PACKET- MUST MATCH FLIGHT ITINERARY				
31. Cognome e nome della persona che ha richiesto il ricongi					
visto per Adozione, Motivi religiosi, Cure Mediche, Sport, St	udio, Missione: indirizzo di recapito in Italia. Surname				
and name of the person in Italy who applied for "family reu	F RIANK				
For Adoption, Religious reasons, Medical reasons, Sport, See	uy, mission, please give the address in Italy:				
Indirizzo e indirizzo di posta elettronica della o delle persone	Telefono e fax della o delle persone che chiedono il				
che chiedono il ricongiungimento o del datore di lavoro ricongiungimento o del datore di lavoro / Telephone or					
Addison and small addison shifts assure (Saches and Saches)	for much a fth and a () and a small of for				
Address and email address of the person(s) who applied for Family reunion or of the employer	fax number of the person(s) who applied for Family reunion or of the employer				
Family reunion or of the employer           LEAVE BLANK           32. Nome e indirizzo dell'impresa/organizzazione che invita	Family reunion or of the employer           LEAVE BLANK           Telefono e fax dell'impresa/organizzazione				
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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 PMZZA SAVONAROLA, 15 FLORENCE I-50132 Cognome, nome, indirizzo, telefono, fax e indirizzo di posta e organizzazione / Surname, first name, address, telephone, fax a Company/organisation SASA PERUGINI- DIRECTOR SU F PIAZZA SAVONAROLA, 15, FLORE 33. Le spese di viaggio e di soggiorno del richiedente sono a c	Family reunion or of the employer LEAVE BLANK Telefono e fax dell'impresa/organizzazione . Telephone and fax of the Company/ organization (39) 055-5031-31 PHONE (39) 055-5030-31 FAX lettronica della persona di contatto presso l'impresa/ nd email address of contact person in LORENCE PERUGINI@SYR.EDU NCE I-50132 arico/ Cost of travelling and living during the				
Family reunion or of the employer LEAVE BLANK 32. Nome e indirizzo dell'impresa/organizzazione che invita //Name and address of host company/organization BYRAQUSE UNIVERSITY IN FLORENCE PLOZENCE + 50132 Cognome, nome, indirizzo, telefono, fax e indirizzo di posta e organizzazione / Surname, first name, address, telephone, fax a Company/organisation SASA PERUGINI- DIRECTOR SU F PLAZZA SAVONAROLA, 15, FLORE 33. Le spese di viaggio e di soggiorno del richiedente sono a c applicant's stay is covered by: Check the following boxes in	Family reunion or of the employer           LEAVE BLANK           Telefono e fax dell'impresa/organizzazione           . Telephone and fax of the Company/ organization           (39) 055-5031-31 PHONE           (39) 055-5000-31 FAX           lettronica della persona di contatto presso l'impresa/ nd email address of contact person in           LORENCE         PERUGINI@SYR.EDU           NCE I-50132           arico/Cost of travelling and living during the dicated and write in the following:				
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] PHAZZA SAVONAROLA, 15 FLORENCE I-50132 Cognome, nome, indirizzo, telefono, fax e indirizzo di posta e organizzazione / Surname, first name, address, telephone, fax a Company/organisation SASA PERUGINI- DIRECTOR SU F PIAZZA SAVONAROLA, 15, FLORE 33. Le spese di viaggio e di soggiorno del richiedente sono a c	Family reunion or of the employer           LEAVE BLANK           Telefono e fax dell'impresa/organizzazione           . Telephone and fax of the Company/ organization           (39) 055-5031-31 PHONE           (39) 055-5000-31 FAX           lettronica della persona di contatto presso l'impresa/ nd email address of contact person in           LORENCE         PERUGINI@SYR.EDU           NCE I-50132           arico/ Cost of travelling and living during the dicated and write in the following:           X del promotore(ospite, impresa, organizzazione),				
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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 INFLORENCE           PHZZA SAVONAROLA, 15           FLORENCE I-S0132           Cognome, nome, indirizzo, telefono, fax e indirizzo di posta e           organizzazione / Surname, first name, address, telephone, fax a           Company/organisation           SASA PERUGINI- DIRECTOR SU F           PIAZZA SAVONAROLA, 15, FLORE           33. Le spese di viaggio e di soggiorno del richiedente sono a c           applicant's stay is covered by:           Check the following boxes in           X del richiedente/Myself           Mezzi di sussistenza/means of support	Family reunion or of the employer           LEAVE BLANK           Telefono e fax dell'impresa/organizzazione           . Telefono e fax dell'impresa/organization           . Telefono e fax dell'impresa/organizzazione           . Telefono e fax dell'impresa/organizzazione           . Telefono e fax dell'impresa dell'impresa/organizzazione           . Telefono e fax dell'impresa, organizzazione,           . Terceix del promotore(ospite, impresa, organizzazione),           . Terceix e soponsor(host, company, organization), please           . Specify SYRACUSE UNIVERSITY           . di cui alle caselle 31 o 32 / referred to in question n.				
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Family reunion or of the employer  LEAVE BLANK  32. Nome e indirizzo dell'impresa/organizzazione che invita //Name and address of host company/organization SYRAUSE UNVERSITY IN FLORENCE PLAZZA SAVONAPOLA, 15 FLORENCE F50132  Company, nome, indirizzo, telefono, fax e indirizzo di posta e organizzazione / Surname, first name, address, telephone, fax a Company/organisation SASA PERUGINI- DIRECTOR SU F PLAZZA SAVONAPOLA, 15, FLORE  33. Le spese di viaggio e di soggiorno del richiedente sono a c applicant's stay is covered by: Check the following boxes in X del richiedente/Myself Mezzi di sussistenza/means of support Contanti/cash Traveller's cheque X Carte di credito/credit card Alloggio prepagato / prepaid accomodation	Family reunion or of the employer           LEAVE BLANK           Telefono e fax dell'impresa/organizzazione				
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Family reunion or of the employer  LEAVE BLANK  32. Nome e indirizzo dell'impresa/organizzazione che invita //Name and address of host company/organization  PYRACUSE UNIVERSITY IN FLORENCE PUZZE SAVONAPOLA, 15 FLORENCE 1-50132 Cognome, nome, indirizzo, telefono, fax e indirizzo di posta e organizzazione / Surname, first name, address, telephone, fax a Company/organisation SASA PERUGINI- DIRECTOR SU F PIAZZA SAVONAPOLA, 15, FLORE  33. Le spese di viaggio e di soggiorno del richiedente sono a c applicant's stay is covered by: Check the following boxes in X del richiedente/Myself Mezzi di sussistenza/means of support Contanti/cash Traveller's cheque Carte di credito/credit card Alloggio prepagato / prepaid accomodation X Trasporto prepagato/prepaid transport Altro (precisare/Other)	Family reunion or of the employer           LEAVE BLANK           Telefono e fax dell'impresa/organizzazione				
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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         FWZZA SAVONAROLA, 15         FLORENCE I-S0132         Cognome, nome, indirizzo, telefono, fax e indirizzo di posta e organizzazione / Surname, first name, address, telephone, fax a Company/organisation         SASA PERUGINI- DIRECTOR SU F         PIAZZA SAVONAROLA, 15, FLORE         33. Le spese di viaggio e di soggiorno del richiedente sono a c applicant's stay is covered by:         Check the following boxes in         X del richiedente/Myself         Mezzi di sussistenza/means of support         Contanti/cash         Traveller's cheque         X Carte di credito/credit card         Alloggio prepagato / prepaid accomodation         X Trasporto prepagato/prepaid transport         Altro (precisare/Other)         INDICAZIONE NON NECESSARIA NEL CASO DI VISTO PER:	Family reunion or of the employer  LEAVE BLANK  Telefono e fax dell'impresa/organizzazione Telephone and fax of the Company/ organization (39) 055-5031-31 PHONE (39) 055-5000-31 FAX  lettronica della persona di contatto presso l'impresa/ nd email address of contact person in LORENCE PERUGINI@SYR.EDU NCE I-50132  atrico/Cost of travelling and living during the dicated and write in the following:  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  altro(precisareOther (please, specify) Mezzi di sussistenza/Menas of support Contanti/cash Alloggio fornito / Accomodation provided Tutte le spese coperte durante il soggiorno/ All expenses covered during the stay Trasporto prepagato/prepaid transport				
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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         PHZZA SAVONAROLA, 15         PLORENCE I-S0132         Cognome, nome, indirizzo, telefono, fax e indirizzo di posta e organizzazione / Surname, first name, address, telephone, fax a Company/organisation         SASA PERUGINI- DIRECTOR SU F         PIAZZA SAVONAROLA, 15, FLORE         33. Le spese di viaggio e di soggiorno del richiedente sono a c applicant's stay is covered by:         Check the following boxes in         X del richiedente/Myself         Mezzi di sussistenza/means of support         Contanti/cash         Traveller's cheque         X Carte di credito/credit card         Alloggio prepagato / prepaid accomodation         X Trasporto prepagato / prepaid transport         Altro (precisare/Other)         INDICAZIONE NON NECESSARIA NEL CASO DI VISTO PER:         Ricongiungimento Familiare, Familiare al Seguito, Lavoro Subordinato/Autonomo, Missione, Diplomatico, Adozione.	Family reunion or of the employer  LEAVE BLANK  Telefono e fax dell'impresa/organizzazione Telephone and fax of the Company/ organization (39) 055-5031-31 PHONE (39) 055-5000-31 FAX  lettronica della persona di contatto presso l'impresa/ nd email address of contact person in LORENCE PERUGINI@SYR.EDU NCE I-50132  atrico/Cost of travelling and living during the dicated and write in the following:  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  altro(precisareOther (please, specify) Mezzi di sussistenza/Menas of support Contanti/cash Alloggio fornito / Accomodation provided Tutte le spese coperte durante il soggiorno/ All expenses covered during the stay Trasporto prepagato/prepaid transport				

34. Dati anagrafici del familiare che è cittadino U	JE, SEE o CH / Persona	l data of the fami	ily member who i s 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 /natio	nality	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         □ coniuge/spouse       □ figlio/a /son/daughter         □ altri discendenti diretti/ other descendants       □ ascendente a carico / dependent ascendant					
36. Luogo e data / Place and date		della potestà g	r i minori, firma del titolare genitoriale/tutore legale)/ minors, signature of parental l guardian)		
CITY, STATE, DATE of s	ignature	STUDE	NT 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 STUDENT SIGNATURE

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 di una domanda di asilo. A determinate condizioni, i dati saranno anche accessibili alle autorità 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, submision 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 or a decision whether to annul or revoke a visa issued will be entered

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.

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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.

refused entry.

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

Firma (per i minori, firma del titolare della potestà genitoriale/ tutore legale) /Signature(for minors, signature of parental authority/legal guardian) Luogo e data / Place and date..... STUDENT SIGNATURE CITY, STATE, DATE of signature

### 5. Bank Letter (Proof of Financial Means)

The consulate requires proof that you have financial means to reside in Florence by presenting the consulate with an original, signed bank letter from a US bank or financial institution. Syracuse Abroad cannot waive or alter this requirement. All students must provide documentation of their funding. See the requirements below and sample bank letter on the following page.

If you are unable to provide proof of the required amount in your own personal checking or savings account, you may submit a bank letter from a checking/savings account in a parent or guardian's name supporting you. If you wish to do this, the account holder must <u>also</u> complete the Affidavit of Support on page 13, have it notarized and submit it with your visa materials. **If you have a joint bank account with a parent or guardian, your parent or guardian must complete the Affidavit of Support.** Please note you may only use the Affidavit of Support provided for you in this packet. You may not use a form from another jurisdiction as they are different.

## Statements from retirement accounts, 401k and stock portfolios are NOT accepted by the Italian consulates in lieu of a bank letter.

Accessible amounts required:

- Semester students: \$4,000
- Academic year students: \$8,000
- Fine Arts Graduate students: \$12,000

\*\*NOTE: Some programs vary in length. If your program is longer than four or eight months, you will need to add \$1,000 per month to the amount.

The format of the letter is basic, but should convey the following:

- YOU (the student) OR the specified person in support of the student are the account holder
- The specified funds are present in your checking/savings account(s) at the time the letter is generated

Guidelines for the bank letter:

- The document must come from a United States bank or financial institution.
- Letter(s) must be original. Copies, scans, emails, and faxes are unacceptable.
- Letter(s) must be on the bank's original letterhead and have a signature of a representative. Electronic signatures are unacceptable.
- Bank statements are unacceptable.
- Letter(s) must be dated as close to the visa deadline as possible.
- You may combine multiple accounts from different institutions to reach your required amount.

United States Bank of Syracuse

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123 Main Street Syracuse, NY 13210

April 15, 2016

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	01/01/2000	
		\$8,000.00		

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

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



I,	
born in	
FORMALLY DEC	CLARE THAT
(1) The visa applicant:	ppears on the passport)
born in	on
born in	(d.o.b. – dd/mm/yyyy)
is my(family relationship – child, parent, sibling and intends to travel in Italy from	z, etc) to
(2) I have sufficient income and assets and I will p during his/her entire stay in Italy.	ay for all of the visa applicant's expenses
Please, find herewith enclosed, the required inform financial situation (e.g. bank statement for the last specifying monthly salary, and any other pertinent	three months, recent letter from my employer

(Date)

(Signature)

(SIGNATURE AND SEAL OF THE NOTARY PUBLIC OR ITALIAN CONSULAR OFFICER)

The above signed statement must be submitted to the Italian Consulate in Miami in original along with a photocopy of valid photo ID (passport - photocopy main pages only) (art. 38 DPR 28.12.2000, N. 445) and relevant financial documentation.

### 6. Pre-Paid UPS Label

You must provide Syracuse Abroad with a pre-paid UPS, FedEx, or US Postal Service label WITH TRACKING INFORMATION in order to have your passport and visa returned to you. You do not need to provide Syracuse Abroad with an envelope, just the label. Following are directions on how to create a label through UPS. The label is available for printing for 24 hours; if you do not have immediate access to a printer, you can save the label as a PDF file and print it later.

#### Go to <u>www.ups.com</u>

Select "ship" from the quick start menu

- 1. Where are you shipping from?
  - a. You are shipping FROM Syracuse Abroad, 106 Walnut Place, Syracuse NY 13244, 315.443.3471, <u>syrflorence@syr.edu</u> (check the box to send status updates to this email address)
  - b. Continue

Where is your shipment going?

- c. You are shipping TO your home address. Enter those details here.
- d. Continue
- 2. What kind of packaging are you using?
  - a. From the drop down list, select "UPS LETTER", weight 1lb, declared value 170 USD
  - b. You can add a reference number or other options if you like, but it's not required
  - c. Continue
- 3. How would you like to ship?
  - a. Select "I'll drop off my shipment or include it in another pickup." Skip the estimated ship date.
  - b. From the selection of boxes shown, **disregard the dates listed and choose the box that says "UPS 2<sup>ND</sup> DAY AIR**". You can choose next day air if you prefer.
  - c. Continue
- 4. Almost done. Let's check a few more details.
  - a. What are you shipping? Enter a descriptor such as "Italian visa"
  - b. Add your personal email address so you can receive notifications of your passport's whereabouts. Select any other options you wish.
  - c. Continue
- 5. How would you like to pay?
  - a. Select payment card and fill out your billing information.
- 6. Review the details; if everything is correct, click "PAY AND GET LABEL".
  - a. If you can't print the label out right away, save it as a PDF so you can print it later. The label is available for printing for 24 hours. If you wait longer than 24 hours, you will have to call UPS customer service for assistance to print the label.

IMPORTANT: Although we will do everything in our power to help you locate a missing package, Syracuse Abroad cannot be responsible for shipments that are wrongfully delivered or lost by UPS. It is UPS policy to require a signature for a package unless otherwise instructed and to leave packages in a secure location. However, we unfortunately have no control over individual drivers and whether they adhere to UPS policy.

Syracuse Abroad recommends that you track your package when you are notified that your passport has been sent. If you have special requirements for delivery (a specific door, ringing the doorbell, etc.), these must be addressed by you as the customer with UPS.

For greater control over how your UPS shipment is delivered, please consider signing up for the UPS My Choice service. You can receive alerts regarding the package and can provide further instructions how you would like the package delivered (leave inside a side door, reschedule, bring to a different address, etc.). Read about this service here:

http://www.ups.com/content/us/en/bussol/browse/personal/delivery\_options/my\_choice.html. To sign up, use this link: http://www.ups.com/mychoice/welcome.html

Please contact UPS Customer Service at 800-PICK-UPS (800-742-5877) with your tracking number if you have questions about the delivery of your package or to file a claim for a missing package. You may also file a claim from your online account.

### 7. Enrollment Verification Letter from Home University

For Non-SU students only. **Obtain this letter from your school's registrar's office**; it should confirm that you are enrolled full time at your home university, and should contain your anticipated graduation date. Letters from National Student Clearinghouse will not be accepted.

Send the original letter with a stamp or seal, copies will not be accepted. If your school would rather send your letter directly to Syracuse Abroad, please contact <u>Courtney Eppel</u>.

### 8. Visa Fee- Money Order

The Italian consulate charges a fee for a long stay student visa. Please submit a money order made out to the Consulate General of Italy in Miami for the exact fee amount (fees change quarterly based on exchange rate; new fee info will be available April 1. You will receive an email in early April with details). Money orders can be purchased at your local post office or at some drugstores.

### 9. Confirmed Round-Trip Flight Itinerary

To obtain a visa, students must provide proof of entry and exit from Europe. You must provide confirmation that you have purchased a round-trip ticket to Italy and out of the Schengen area (explanation on the following page). Make a copy of the flight confirmation from the airline, agent or travel agency. This must include all legs of your flight and confirmation that you purchased the flight.

If you are traveling on the group flight and/or booking your flight through Advantage Travel, we will get your itinerary directly from them. Please ensure that you purchase this flight before the visa deadline. If you have questions regarding group flights, call Advantage Travel (315-471-2222).

You are responsible for researching whether you need a visa for any independent travel before, during or after the program. **International students are strongly advised to check tourist visa requirements** thoroughly as there may be restrictions.

Syracuse Airways 🌙	Your Reservations	Sy	racuse Airways 🏾 🌙		Your Reservations
You're confirmed! Date issued: Tuesday, September 02, 20: Confirmation code: BDPQ758	14 Scan barcole for boarding pass		FRA JFK Frankfurt to New Flight: 5A2846 Depart: 3:00pm Artive: 4A5pm Meal: Dinner	York City (April 30,2015) Travel Time: 7h 45m Aircraft: 747 Cabin: Coach Seat: 30C	
Trip details: <u>Download to calendar</u> DEPART			Total travel cost		
JFK	ankfurt (January 11, 2015) Travel Time: 7h. 25m Akrant: 747 Cabin: Coach Seat: 25F		Fare JFK to FLR FLR to JFK Taxes and fees Total Charged to Jenny C. Doe	Adult \$650 \$700 \$80 \$1,430	
FRA	e (Ianuary 11, 2015) Travel Time: 3h 17m Aircraft: 737 Cabin: Coach Seat: 17C		************7328 (Visa)	You paid \$1,430	
RETURN					
FLR	rt (April 30, 2015) Travel Times (30 Oom Akrantin 23 Cablen: Caseh Seat: 170				

### 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.

Countries Austria EU - Yes/Schengen - Yes Belgium EU - No/Schengen - Yes Czech Republic • EU - Yes/Schengen - No Denmark Estonia Finland France . Germany • FINLAND Greece Hungary . ESTONIA Iceland (not EU) LATVIA Italy . LITHUANIA DENN Latvia UNITED KINGDOM IRELAND BELARUS Liechtenstein (not EU) • NETHERLANI Lithuania POLAND . GERMANY UKRA Luxembourg . BEI GIUM CZECH REP. Malta SLOVAKIA HUNGARY Netherlands . FRANCE ROMANIA Norway (not EU) . ITALY ROSNA Poland BULGARIA Portugal • PORTUGAL SPAIN Slovakia GREECE Slovenia Spain Sweden ALGERIA TUNISIA MALTA MOROCCO Switzerland (not EU)

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#### Designation of Syracuse University Abroad as Representative for

#### Visa Application Process

To the student: in order for Syracuse University Abroad to submit your student visa application to the Consulate on your behalf and retrieve your passport with visa from the Consulate, you must complete and sign the below authorization.

I, \_\_\_\_\_\_, hereby authorize Syracuse University Abroad staff as representatives of Syracuse University Abroad to submit the necessary student visa application forms, including my passport, to the Consulate on my behalf. I also authorize the representatives to receive my processed visa application materials, including my passport, on my behalf.

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Signature of student

Cell phone or other contact information

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