

# Italian Student Visa Instructions: Applying Independently through Detroit

## CONSULATE OF ITALY IN DETROIT

400 Renaissance Center  
Suite 950  
Detroit, MI 48243  
Tel.: (313) 963-8560  
Fax: (313) 963-8180  
E-mail: [visa.detroit@esteri.it](mailto:visa.detroit@esteri.it)

Jurisdiction: Indiana, Kentucky, Michigan, Ohio, Tennessee

Students who attend school or have a home address within this jurisdiction can apply for their visa here.

Main contact at Syracuse Abroad for visas:

**Dylan Eldred**, Florence Visa Coordinator  
315-443-9428, [syrflorence@syr.edu](mailto:syrflorence@syr.edu)

### **Before you begin:**

- Ensure your passport is valid for at least six months after your program ends.
- Ensure you have a [REAL ID](#) if you have any domestic air travel between April and the start of the Florence program as you will need to submit your passport to the consulate to process your visa and will not be able to use your passport for travel during this time.

**Make an appointment at the Italian consulate in Detroit [immediately](#).** This should be for a study visa (“Studio”; study longer than 90 day stay). Appointments fill up very quickly, so if you wait, you may not be able to find an appointment and will have to search for a cancelled appointment. The earliest possible appointment date you can schedule is **Monday, September 7th** as there are documents you need from our office to include in your application.

Create your user account and make a visa appointment [here](#).

For a step-by-step guide on how to schedule an appointment, [click here](#).

**IMPORTANT: About 10 days before the appointment, you will receive an email from the Italian consulate asking you to confirm your appointment. It is imperative that you do this immediately. Failure to confirm your appointment will result in the consulate cancelling it (3 business days before) and it will be released back into the system. You will not be able to enter the consulate on the original appointment date and will have to look for a new appointment. You will need to log back into your account to confirm your visa appointment.**

- You must appear at the consulate in person. You cannot send anyone else to the appointment on your behalf. Visa applications cannot be mailed to the consulate.
- Processing time is typically 3-4 weeks to receive your passport back with your visa. Note that it is possible for visa processing to take up to 90 days so make sure to plan accordingly.

First, complete the Independent Visa Plan (Italy) questionnaire in your [OrangeAbroad Portal](#) to provide us with information regarding which consulate you plan on applying through, your current address to send visa documents to you for your appointment (if applicable), and to indicate any international travel plans. This form needs to be completed and submitted by **October 1st.**

Once you have made your visa appointment, please complete the Scheduled Visa Appointment (Italy) questionnaire in your [OrangeAbroad portal](#), so we can provide the original documentation that is required from Syracuse Abroad (hard copies of enrollment letters in English and Italian, and an insurance certificate). Schedule your visa appointment at the consulate for no later than **November 9th**. Any later and you risk not receiving your passport/student visa back in time for the start of the program. The deadline to schedule your visa appointment at the consulate and complete the Scheduled Visa Appointment questionnaire is **November 27th**.

You are required to have a visa advising meeting with the Florence Visa Coordinator to review your visa documents prior to your visa appointment at the consulate. You can schedule this meeting using the link below. Please schedule your advising appointment once you have all your visa materials gathered before your visa appointment at the consulate. We ask that you schedule your advising appointment for **at least a week** before your consulate appointment to make sure you have time to correct any mistakes.

[SCHEDULE VISA ADVISING APPOINTMENT](#)

Syracuse students can review their materials in person at the Syracuse Abroad office (106 Walnut Pl) while visiting students will have their visa advising appointment over Zoom before your visa appointment at the consulate.

Once you have received your passport back from the consulate with your Italian student visa, you will need to upload a scan of your visa to your [OrangeAbroad portal](#) under the “Student Visa Upload (Italy)” questionnaire. Please complete this form as soon as you receive your passport back with your visa, but no later than **December 31st**.

**Signature Seminar:** If you are at all interested in our optional [pre-semester Signature Seminar](#), please plan to obtain your visa for the correct number of days. The Signature Seminar ends **on Sunday, May 9<sup>th</sup>** while our regular program begins on **Thursday, April 29<sup>th</sup>**. More information about how to sign up for the Signature Seminar will be shared with you soon.

#### **WAIVER NOTICE**

By applying independently for your visa, you accept full responsibility for the application process. **Syracuse 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 resolved. Syracuse Abroad can provide advice and guidance but is not liable or responsible for independent visa applicants.

Additional Questions? We would be happy to assist you. Please email: [syrflorence@syr.edu](mailto:syrflorence@syr.edu).

## Important To Dos and Deadlines

- ✓ Earliest date to schedule your visa appointment at the consulate-  
**Monday, September 7th**
- ✓ Complete “Independent Visa Plan (Italy)” questionnaire in your OrangeAbroad Portal- by **October 1st**
- ✓ Schedule your visa advising appointment
- ✓ Deadline to gather your visa materials and meet with a Syracuse Abroad advisor for visa material review- **One week before consulate appointment**
- ✓ Book an appointment with the consulate and complete “Scheduled Visa Appointment (Italy)” Questionnaire in your OrangeAbroad Portal- by **November 9th**
- ✓ Deadline to have your visa appointment at the consulate-  
**November 27th**
- ✓ Upload a scan of your Italian student visa under the “Student Visa Upload (Italy)” questionnaire in your OrangeAbroad Portal- As soon as you receive your passport back with your visa, but no later than **December 31st**

# Checklist of Required Visa Documents

These documents are mandatory, no exceptions can be made.

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

- ☐ **1. Duly filled Visa Application Form.** Please note that all the names appearing on the passport must appear on the application form (all data must match those on the passport). The form must be dated and signed in front of a Visa Officer at the Consulate.
- ☐ **2. Valid passport** plus 1 copy of the page with photograph and expiration date. The passport or travel document must be valid at least six months after the visa expiration date. Please make sure the passport has at least two blank pages to affix the visa.

**For non-US citizens:** Copy of Permanent Residence Card or other US immigration document allowing re-entry into the United States (e.g., valid long-term US visa, Advanced Parole, etc.). The US Residence permit or visa should be valid at least three months beyond the intended departure from the Schengen territory. International students must also submit original and copy of F-1 Visa and valid re-entry ("travel") signature on your I-20. Please provide copy of old passport if US visa is affixed there.

- ☐ **3. Recent passport-size photograph** on white background, full face and front view. Scanned or photocopied photos will NOT be accepted.
- ☐ **4. Copy of Driver's License /State ID and Student ID** as proof of residence in the jurisdiction of this Consulate. Full-time students should also include a copy of Student ID. If you recently moved and have not updated your ID, you must submit another proof of current address (e.g., utility bills, bank statements, etc.).
- ☐ **6. Letter of acceptance** from an accredited institution in Italy. The letter, on the institution's letterhead, must be addressed to the Consulate of Italy and specify the period of study, the full-time enrollment (at least 20 hours per week), and if tuition and room/board are covered in full. **SYRACUSE ABROAD WILL PROVIDE THIS LETTER TO YOU FOR YOUR APPLICATION**

- ☐ **7. Letter of acceptance** into the Study Abroad Program. **SYRACUSE ABROAD WILL PROVIDE THIS LETTER TO YOU FOR YOUR APPLICATION**
- ☐ **8. Letter of enrollment from home academic institution** addressed to the Consulate of Italy, indicating the student's current status (full-time in good standing) and expected date of graduation. **This letter should come from your school's registrar's office.**  
**Syracuse University students- this letter will be provided to you by Syracuse Abroad.**
- ☐ **9. Proof of financial means.** A bank letter or bank statement from the last three months from a US banking institution. Students who receive financial aid must present a letter from their university stating the amount of aid and time of disbursement.  
  
**Affidavit of Support.** If the applicant does not have own funds because they are supported by their parents or have a joint bank account with their parent or guardian, one or both parents must submit an affidavit of support with the bank statement as mentioned above. The affidavit must be notarized by a Notary Public.
- ☐ **10. Proof of health insurance coverage abroad.** **SYRACUSE ABROAD WILL PROVIDE THIS LETTER TO YOU FOR YOUR APPLICATION**
- ☐ **11. Money Order** (type D Study) duly filled out and made to: Consulate General of Italy in Detroit. Please see the consulate's [website](#) for current fees and keep in mind that they change quarterly (January 1, April 1, July 1, and October 1)
- ☐ **12. Round trip flight** from the U.S to the Italy and departure from Schengen area.
- ☐ **13. Return envelope.** Provide a USPS or Fed Ex envelope with a tracking number, pre-paid and self-addressed.

## 1. Visa Application Form

You must submit a paper application for your visa. Please fill out the application based on the sample provided on the following pages. Fill out each page exactly as it is filled out on the sample with your appropriate information. There are three signatures required for this application, and you must complete all for the application to be complete. Blank application forms are available [here](#).

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

### Number of Days for Spring 27 (question 25)

| Question 25: Program                                                                                                                                      | Number of Days |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|
| Florence Center, Studio Arts, Architecture, Florence Center: Wake Forest Business, Florence Center and University of Florence (courses taught in English) | 107 days       |
| Signature Seminar                                                                                                                                         | 117 days       |

### Program Dates for Spring 27 (questions 29 and 30)

*If your arrival/departure dates differ from the program dates, please answer question 29 & 30 based on flight itinerary.*

| Question 29: Program                                                                                                                                      | Arrival Date            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Florence Center, Studio Arts, Architecture, Florence Center: Wake Forest Business, Florence Center and University of Florence (courses taught in English) | Arrive January 13, 2027 |
| Signature Seminar                                                                                                                                         | Arrive January 13, 2027 |

| Question 30: Program                                                                                                                                      | Departure Date        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| Florence Center, Studio Arts, Architecture, Florence Center: Wake Forest Business, Florence Center and University of Florence (courses taught in English) | Depart April 29, 2027 |
| Signature Seminar                                                                                                                                         | Depart May 9, 2027    |



**Consolato d'Italia  
DETROIT**

FOTOGRAFIA  
PHOTOGRAPH

**LEAVE  
BLANK**

**Domanda di visto Nazionale (D) / Application for National Visa (D)**  
Modulo gratuito / This application form is free

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                                                                                                                                                                   |  |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 1. Cognome / Last Name (x)<br><b>LAST NAME (must match passport)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | FOR OFFICIAL USE ONLY                                                                                                                                                                                                                                                                                                                             |  |
| 2. Cognome alla nascita (cognome/i precedente/i) / Last name at birth (x)<br><b>LEAVE BLANK</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | Spazio riservato all'amministrazione                                                                                                                                                                                                                                                                                                              |  |
| 3. Nome/i / First and Middle Names (x)<br><b>FIRST and MIDDLE NAME (must match passport)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | Data della domanda:                                                                                                                                                                                                                                                                                                                               |  |
| 4. Data di nascita (giorno-mese-anno)<br>Date of birth (day-month-year)<br>____/____/____<br>day / month / year<br>DATE OF BIRTH- format: day/month/year (29/05/1991)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  | 5. Luogo di nascita / Place of birth<br>CITY and STATE of birth<br>_____<br>6. Stato di nascita / Country of birth<br>COUNTRY of birth<br>_____                                                                                                                                                                                                                                                            |  | 7. Cittadinanza attuale<br>Current nationality<br>NATIONALITY (ex: USA, CHINESE)<br>_____<br>Cittadinanza alla nascita, se diversa<br>Nationality at birth, if different: _____<br>if you were born a different nationality                                                                                                                       |  |
| 8. Sesso / Sex:<br><input type="checkbox"/> Maschile / Male<br><input type="checkbox"/> Femminile / Female<br><b>select appropriate box</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  | 9. Stato civile / Marital status <b>select appropriate box</b><br><input type="checkbox"/> Non coniugato/a / Single<br><input type="checkbox"/> Separato/a / Separated<br><input type="checkbox"/> Vedovo/a / Widow(er)<br><input type="checkbox"/> Altro (precisare) / Other (please specify) _____<br><input type="checkbox"/> Coniugato/a / Married<br><input type="checkbox"/> Divorziato/a / Divorced |  | Numero della domanda di visto:<br><br>Domanda presentata presso:<br><input type="checkbox"/> Ambasciata/Consolato<br><input type="checkbox"/> Centro comune<br><input type="checkbox"/> Fornitore di servizi<br><input type="checkbox"/> Intermediario commerciale<br><input type="checkbox"/> Altro<br><br>Nome:                                 |  |
| 10. Per i minori: cognome, nome, indirizzo (se diverso da quello del richiedente) e cittadinanza del titolare della potestà genitoriale/tutore legale / In the case of minors: First and last name, address (if different from applicant's) and nationality of parental authority/legal guardian:<br><b>LEAVE BLANK</b>                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | Responsabile della pratica:<br><br>Nome di chi ha ricevuto la pratica allo sportello:                                                                                                                                                                                                                                                             |  |
| 11. Numero d'identità nazionale, ove applicabile / National identity number, where applicable: <b>LEAVE BLANK</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | Documenti giustificativi:<br><input type="checkbox"/> Documento di viaggio<br><input type="checkbox"/> Mezzi di sussistenza<br><input type="checkbox"/> Invito<br><input type="checkbox"/> Mezzi di trasporto<br><input type="checkbox"/> Assicurazione sanitaria di viaggio<br><input type="checkbox"/> Altro                                    |  |
| 12. Tipo di documento / Type of Passport or Travel Document:<br><input checked="" type="checkbox"/> Passaporto ordinario / National passport<br><input type="checkbox"/> Passaporto di servizio / Service passport<br><input type="checkbox"/> Passaporto speciale / Special passport<br><input type="checkbox"/> Documento di viaggio di altro tipo (precisare) / Other travel document (please specify) _____<br><b>SELECT "NATIONAL PASSPORT"</b>                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | Decisione relativa al visto:<br><input type="checkbox"/> Rifiutato<br><input type="checkbox"/> Rifiutato per segnalazione SIS non cancellabile.<br><input type="checkbox"/> Pratica Sospesa<br><input type="checkbox"/> Rilasciato                                                                                                                |  |
| 13. Numero del documento di viaggio / Passport number:<br>_____<br><b>PASSPORT NUMBER</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  | 14. Data di rilascio / Date of issue (day / month / year)<br>____/____/____<br>date issued                                                                                                                                                                                                                                                                                                                 |  | 15. Valido fino al / Valid until<br>____/____/____<br>date of expiration                                                                                                                                                                                                                                                                          |  |
| 17. Indirizzo del domicilio e indirizzo di posta elettronica del richiedente / Applicant's home address and e-mail address:<br><b>Your PERMANENT ADDRESS and EMAIL ADDRESS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  | 16. Rilasciato da / Issued by<br>_____<br>COUNTRY of issue (ex: USA, CHINA)                                                                                                                                                                                                                                                                                                                                |  | 18. Residenza in un paese diverso dal paese di cittadinanza attuale / Residence in a country other than the country of current nationality<br><input checked="" type="checkbox"/> No / No <b>Select "NO" unless applicable</b><br><input type="checkbox"/> Si / Yes Titolo di soggiorno o equivalente / Residence permit or equivalent: n./ _____ |  |
| Valido fino al / Valid until ____/____/____ (day / month / year)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | Tipo di visto:<br><input type="checkbox"/> D                                                                                                                                                                                                                                                                                                      |  |
| 19. Occupazione attuale (if full-time student, state "student"):<br><b>STUDENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | dal .....<br>al.....                                                                                                                                                                                                                                                                                                                              |  |
| 20. Datore di lavoro, indirizzo e numero di telefono. Per gli studenti nome e indirizzo dell'istituto di insegnamento<br>Employer and employer's address and telephone number. For students, name and address of home institution:<br><b>List your HOME UNIVERSITY name and its ADDRESS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | Numero di ingressi:<br><input type="checkbox"/> 1<br><input type="checkbox"/> 2<br><input type="checkbox"/> Multipli                                                                                                                                                                                                                              |  |
| 21. Scopo del viaggio / Main purpose(s) of the journey:<br><b>Select "STUDY" only</b><br><input type="checkbox"/> Ricongiungimento Familiare/Familiare al Seguito / Family reunion/Accompanying family member<br><input type="checkbox"/> Motivi Religiosi/Religious purposes <input type="checkbox"/> Sport/Sports <input type="checkbox"/> Missione/Mission <input type="checkbox"/> Diplomatico/Diplomatic<br><input type="checkbox"/> Cure Mediche/Medical reasons..... <input checked="" type="checkbox"/> Studio/Study <input type="checkbox"/> Adozione/Adoption <input type="checkbox"/> Lavoro subordinato/Work<br><input type="checkbox"/> Lavoro autonomo/Self-employment <input type="checkbox"/> Di altro tipo (precisare)/Other (please specify) _____ |  |                                                                                                                                                                                                                                                                                                                                                                                                            |  | Numero di giorni:<br>.....                                                                                                                                                                                                                                                                                                                        |  |

(x) Alle caselle da 1 a 3 le informazioni vanno inserite come indicate nel documento di viaggio  
Fields 1 - 3 shall be filled in accordance with the data in the passport or travel document

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 22. Città di destinazione / City of destination in Italy:<br><b>FLORENCE, ITALY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 23. Eventuale Stato membro di primo ingresso<br>Other European Schengen country of first entry:<br><b>ITALY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 24. Numero di ingressi richiesti/ Number of entries required:<br><input type="checkbox"/> Uno/Single entry <input type="checkbox"/> Due/ Two entries<br><input checked="" type="checkbox"/> Multipli/Multiple entries                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 25. Durata del soggiorno. Indicare il numero dei giorni (max. 365gg.) / Duration of the intended stay . Indicate number of days (max 365 days):<br><b>PLEASE REFER TO DATES IN PACKET (ex: 107 days)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 26. Visti Schengen rilasciati negli ultimi tre anni / Schengen Visas issued during the past three years:<br><input checked="" type="checkbox"/> No/ No <b>Select "NO" unless you have another Schengen Visa in your passport</b><br><input type="checkbox"/> Si/Yes Data/e di validità /Date(s) of validity dal/from ____/____/____ al /to ____/____/____ (day / month / year)                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 27. Impronte digitali rilevate in precedenza ai fini della presentazione di una domanda di visto Schengen<br>Fingerprints collected previously for the purpose of applying for a Schengen visa <b>Select "NO" unless applicable</b><br><input checked="" type="checkbox"/> No/No <input type="checkbox"/> Si/Yes Data, se nota/Date, if known:____/____/____ (day / month / year)                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 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 (Entry Permit) Number issued for Family Reunion/Accompanying family member/Work), where applicable:<br>Rilasciato dal SUI di /Issued by Immigration Desk of (city): <b>LEAVE ALL BLANK</b><br>Valido dal/Valid from ____/____/____ (day / month / year) al/until ____/____/____ (day / month / year)                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 29. Data di arrivo prevista nell'area Schengen/Intended date of arrival in the Schengen area<br><b>REFER TO DATES IN PACKET- MUST MATCH FLIGHT ITINERARY (day/ month/ year)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 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 visas between 91 and 364 days of stay)<br><b>REFER TO DATES IN PACKET- MUST MATCH FLIGHT ITINERARY</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 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/First and last name of the person(s) in Italy requesting the reunion, or of the employer. For Adoption, Religious purposes, Medical reasons, Sport, Study and Mission visas, give (school) address in Italy: <b>LEAVE BLANK</b>                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Indirizzo e indirizzo di posta elettronica della/e persona/e che chiedono il ricongiungimento, o del datore di lavoro / Address and e-mail of person(s) requesting the reunion, or of the employer:<br><b>LEAVE BLANK</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Telefono e fax della/e persona/e che chiedono il ricongiungimento, o del datore di lavoro / Telephone and fax of person(s) requesting the reunion, or of the employer:<br><b>LEAVE BLANK</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 32. Nome e indirizzo dell'impresa/organizzazione invitante/<br>Name and address of inviting company/organization:<br>SYRACUSE UNIVERSITY IN FLORENCE<br>PIAZZA SAVONAROLA, 15<br>FLORENCE I-50132                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Telefono e fax dell'impresa/organizzazione invitante /<br>Telephone and fax of inviting company/organization:<br><b>(39) 055-5031-31 PHONE</b><br><b>(39) 055-5000-31 FAX</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Cognome, nome, indirizzo, telefono, fax e indirizzo di posta elettronica della persona di contatto presso l'impresa / organizatione / Name and last name, address, phone, fax and e-mail address of contact person in company/organization:<br><b>SASA PERUGINI- DIRECTOR SU FLORENCE PERUGINI@SYR.EDU</b><br><b>PIAZZA SAVONAROLA, 15, FLORENCE I-50132</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| 33. Le spese di viaggio e di soggiorno del richiedente sono a carico del /Cost of traveling and living during the applicant's stay is covered by: <b>Check the following boxes indicated and write in the following:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <input checked="" type="checkbox"/> richiedente/Myself:<br><br>Mezzi di sussistenza/Means of support:<br><input type="checkbox"/> Contanti/Cash<br><input type="checkbox"/> Traveller's cheque /Traveller's cheque<br><input checked="" type="checkbox"/> Carte di credito /Credit card<br><input type="checkbox"/> Alloggio prepagato/Prepaid accommodation<br><input checked="" type="checkbox"/> Trasporto prepagato/Prepaid transport<br><input type="checkbox"/> Altro (precisare)/Other (please specify):.....<br><br>INDICAZIONE NON NECESSARIA NEL CASO DI VISTO PER: Ricongiungimento Familiare, Familiare al Seguito, Lavoro Subordinato/Autonoma, Missione, Diplomatico, Adozione.<br>INFORMATION NOT REQUIRED IN CASE OF VISA FOR: Family reunion, Accompanying family member, Work, Self employment, Mission, Diplomatic, Adoption. | <input checked="" type="checkbox"/> promotore (ospite, impresa, organizzazione), precisare/ Sponsor (host, company, organization) please specify: <b>SYRACUSE UNIVERSITY</b> ..... di cui alle caselle 31 o 32/referred in field 31 or 32<br><input type="checkbox"/> altro (precisare)/other (please specify):.....<br><br>Mezzi di sussistenza/Means of support:<br><input type="checkbox"/> Contanti/Cash.....<br><input checked="" type="checkbox"/> Alloggio fornito/Accommodation provided<br><input type="checkbox"/> Tutte le spese coperte durante il soggiorno/All expenses covered during stay<br><input type="checkbox"/> Trasporto prepagato/Prepaid transport<br><input type="checkbox"/> Altro (precisare)/Other (please specify):..... |

|                                                                                                                                                                                                                                                                                                                                                            |                            |                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 34. Dati anagrafici del familiare che è cittadino UE, SEE o CH / <b>Personal data of the family member who is an EU, EEA or CH (Swiss) citizen:</b><br><b>ONLY IF APPLICABLE, fill in this section (34 and 35)</b>                                                                                                                                         |                            |                                                                                                                                                                                                  |
| Cognome / Last Name                                                                                                                                                                                                                                                                                                                                        |                            | Nome/i / First and Middle Name(s)                                                                                                                                                                |
| Data di nascita / Date of birth                                                                                                                                                                                                                                                                                                                            | Cittadinanza / Nationality | Numero del documento di viaggio o della carta d'identità/Passport or ID number:                                                                                                                  |
| 35. Vincolo familiare con un cittadino UE, SEE o CH / <b>Family relationship with an EU, EEA or CH (Swiss) citizen:</b><br><input type="checkbox"/> coniuge/spouse <input type="checkbox"/> figlio/a / child<br><input type="checkbox"/> altri discendenti diretti/other direct descendants <input type="checkbox"/> ascendente a carico/dependent parents |                            |                                                                                                                                                                                                  |
| 36. Luogo e data / <b>Today's Place and Date</b><br>_____, ____/____/____ (day / month / year)<br><b>CITY, STATE, DATE of signature</b>                                                                                                                                                                                                                    |                            | 37. Firma (per i minori, firma del titolare della potestà genitoriale/tutore legale)/ <b>Signature (for minors, signature of parental authority/legal guardian):</b><br><b>STUDENT SIGNATURE</b> |
| Sono a conoscenza del fatto che il rifiuto del visto non dà luogo al rimborso dei diritti prestati per la trattazione della pratica<br><b>I am aware that the visa fee is not refunded if the visa is refused</b> <b>STUDENT SIGNATURE</b>                                                                                                                 |                            |                                                                                                                                                                                                  |

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 and the taking of my photograph and, if applicable, the taking of fingerprints, are mandatory for the examination of the visa application; and any personal data concerning me which appear on the visa application form, as well as my fingerprint and my photograph will be supplied to the relevant authorities of the Member State and processed by those authorities, for the purposes of a decision on my visa application.

Such data as well as data concerning the decision taken on my application or a decision whether to annul, revoke or extend a visa issued will be entered into, and stored in the Visa Information System (VIS) of the Diplomatic Consular Representative Office and Ministry of Foreign Affairs; such data will be accessible to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the Member State, immigration and asylum authorities in the Member States (for the purposes of verifying whether the conditions for the legal entry into, stay and residence on the territory of the Member States are fulfilled, of identifying persons who do not or who no longer fulfil these conditions) and to the authority of the Member State competent for the examination of asylum application. Under certain conditions the data will be also available to designated authorities of the Member States and to Europol for the purpose of the prevention, detection and investigation of terrorist offences and other serious criminal offences.

me processed I am aware that I have the right to obtain in any of the Member States notification of the data relating to me recorded in the VIS and of the Member State which transmitted the data, and to request that data relating to me which are inaccurate be corrected and that data related to unlawfully be deleted. At my express request, the authority examining my application will inform me of the manner in which I may exercise my right to check the personal data concerning me and have them corrected or deleted, including the related remedies according to the national law of the State concerned.

The national supervisory authority of that Member State is the "Garante per la Protezione dei Dati Personali"

I declare that to the best of my knowledge all particulars supplied by me are correct and complete. I am aware that any false statements will lead to my application being rejected or to the annulment of a visa already granted and may also render me liable to prosecution under the law of the Member State which deals with the application (art. 331 c.p.p.). The mere fact that a visa has been granted to me does not mean that I will be entitled to compensation if I fail to comply with the relevant provisions of Article 5 (1) of Regulation (EC) No 562/2006 (Schengen Borders Code) and art. 4 of D. Lgs. 286/98 and I am therefore refused entry.

|                                                                                                                                     |                                                                                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Luogo e data / <b>Today's Place and Date</b><br>_____, ____/____/____ (day / month / year)<br><b>CITY, STATE, DATE of signature</b> | Firma (per i minori, firma del titolare della potestà genitoriale/tutore legale)/ <b>Signature (for minors, signature of parental authority/legal guardian)</b><br><b>STUDENT SIGNATURE</b> |
|-------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Il sottoscritto dichiara di aver preso visione dell'informativa sulla protezione dei dati personali riguardante il rilascio dei visti, ai sensi del Regolamento Generale sulla Protezione dei Dati (UE) 2016/679.

I acknowledge that I have read the personal data protection notice on the subject of the issuance of visa, as set forth by the General Regulation (EU) 2016/679 on the Protection of Personal Data.

Data/Date .../.../... **DATE in day/month/year format**

Firma/Signature..... **STUDENT SIGNATURE**

## 2. 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 in PEN
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.

The Secretary of State of the United States of America hereby requests all whom it may concern to permit the citizen/national of the United States named herein to pass without delay or hindrance and in case of need to give all lawful aid and protection.

THIS IS A  
**SAMPLE**

Le Secrétaire d'Etat des Etats-Unis d'Amérique prie par les présentes toutes autorités compétentes de laisser passer le citoyen ou ressortissant des Etats-Unis titulaire du présent passeport, sans délai ni difficulté et, en cas de besoin, de lui accorder toute aide et protection légitimes.

El Secretario de Estado de los Estados Unidos de América por el presente solicita a las autoridades competentes permitir el paso del ciudadano o nacional de los Estados Unidos aquí nombrado, sin demora ni dificultades, y en caso de necesidad, prestarle toda la ayuda y protección lícitas.

SIGNATURE OF BEARER/SIGNATURE DU TITULAIRE/FIRMA DEL TITULAR

NOT VALID UNTIL SIGNED

PASSPORT  
PASSEPORT  
PASAPORTE

UNITED STATES OF AMERICA

Type / Type / Tipo Code / Code / Código Passport No. / No. du Passeport / No. de Pasaporte  
P USA

Surname / Nom / Apellidos  
Given names / Prénoms / Nombres  
Nationality / Nationalité / Nacionalidad  
UNITED STATES OF AMERICA  
Date of birth / Date de naissance / Fecha de nacimiento  
Sex / Sexe / Sexo Place of birth / Lieu de naissance / Lugar de nacimiento  
M COLORADO, U.S.A.  
Date of issue / Date de délivrance / Fecha de expedición Authority / Autorité / Autoridad  
13 Jan 2003 Seattle  
Date of expiration / Date d'expiration / Fecha de caducidad  
12 Jan 2013 Passport Agency  
Amendments / Modifications / Enmiendas  
See Page 24

CHECK EXPIRATION

### 3. One Official Passport Photo



The consulate requires a separate photo to create your visa.

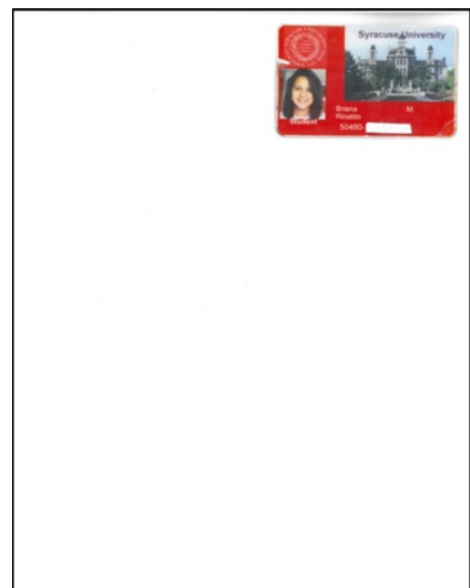
This does not need to be the same photo as in your passport. This photo should reflect your current appearance and be no more than 6 months old. You may have official passport photos taken at the post office, drugstores and other stores (*i.e.*, CVS) for a fee. The photo should feature only you in front 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 on the left. The photo should be stapled to the appropriate spot on the application or attached with a paper clip.

### 4. Copy of your Student ID and Driver's License or State ID

Please make a copy of your Driver's License or State ID onto a blank sheet of paper and ensure the copy is clear and legible. Please do the same with your Student ID.

**Non-U.S. citizens:** please make a photocopy of your green card, or a copy of your F-1/ J-1 visa and I-20 or DS-2019.



## 5. Proof of Financial Means

The consulate requires proof that you have financial means to reside in Florence.

You can satisfy this requirement by presenting the consulate with three most recent bank statements or a letter from a US banking institution, on the bank's letterhead, signed by a bank official and with a recent date, indicating your account balance. **The accounts must be either a checking or savings account.** Syracuse Abroad cannot waive or alter this requirement.

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 or statements from a checking/savings account in a parent or guardian's name supporting you. If you wish to do this, the account holder must also complete the [Affidavit of Support](#), 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](#).**

**Statements from retirement accounts, 401k and stock portfolios are NOT accepted by the Italian consulates. Only bank statements/letters of US checking and savings accounts are accepted.**

Accessible amounts required (a minimum of \$ 1000.00USD per each month of stay is required)

- Center semester students: approximately \$4,000USD

Guidelines for the bank letter or statement

- YOU (the student) OR the specified person in support of the student is the account holder
- Letter or statement must reference US checking or savings accounts only.
- Letter or statement must be original and look as official as possible:
  - Copies, scans, and faxes are not accepted.
  - If providing a bank letter- it should be on the bank's original letterhead and have a signature of a representative if possible.
    - *Note that some large national banks (such as Chase or Bank of America) may only provide an electronic Bank Letter and some do not provide signatures.*
- You may combine accounts from different institutions to reach your required amount.



## Bank of Syracuse

123 Main Street  
Syracuse, NY 13210



**Example of a  
Bank Letter**

September 20, 2025

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<br>\$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  
John.Doe@USBS.com

AFFIDAVIT OF SUPPORT

I, \_\_\_\_\_ born in \_\_\_\_\_  
on \_\_\_\_\_ BEING DULY SWORN ON OATH, DEPOSES AND SAYS:

■ that the visa applicant \_\_\_\_\_ born in \_\_\_\_\_  
on \_\_\_\_\_ is my son/ daughter / myself  
(city/State)  
(DOB)

■ that the applicant intends to pursue his/her education by attending  
\_\_\_\_\_ in \_\_\_\_\_  
(name of academic Institution) (city/province in Italy)

from/to \_\_\_\_\_ of the academic year \_\_\_\_\_  
(exact period of study)

■ that I, the affiant, have full time employment as \_\_\_\_\_  
(profession)

■ that I have sufficient income/assets to responsibly cover the visa applicant's expenses during his/her entire course of study in Italy as well as any and all other unforeseen expenses which the applicant may incur during his/her entire stay in Italy.

■ that I, the affiant, will pay the visa applicant's expenses as outlined above.

FURTHER, AFFIANT SAYETH NOT.

Affiant's signature \_\_\_\_\_

SWORN AND SUBSCRIBED TO BEFORE ME THIS \_\_\_\_\_ DAY OF THE MONTH OF  
\_\_\_\_\_ OF THE YEAR \_\_\_\_\_

SEAL

\_\_\_\_\_  
(Signature of Notary Public)

I acknowledge that I have read the personal data protection notice on the subject of the issuance of visa,  
as set forth by the General Regulation (EU) 2016/679 on the Protection of Personal Data.

Date .../.../...

Signature.....

## 6. Money Order

Applicants are required to pay a processing fee in the form of a personal money order. Please check the exact amount on the [fee page](#) of the Italian Consulate's website. Note that the fees are updated each quarter (January 1, April 1, July 1 and October 1) so you should check the website close to your appointment date for the current fee.

Make money order out to Consulate General of Italy in Detroit and use the address of the consulate:

Consulate of Italy in Detroit  
400 Renaissance Center  
Suite 950  
Detroit, MI 48243

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 (preferred). Some pharmacies may also sell money orders, as should your bank. Any alteration to the money order (i.e. Whiteout) will render it unacceptable.

**DO NOT SIGN THE BACK!**

**UNITED STATES POSTAL SERVICE® POSTAL MONEY ORDER** 15-820 000

SERIAL NUMBER: 01010100 YEAR, MONTH, DAY: DATE POST OFFICE: 55555 U.S. DOLLARS AND CENTS: CHECK AMOUNT

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

PAY TO: **CONSULATE GENERAL OF**

ADDRESS: **CONSULATE ADDRESS**

**CITY STATE ZIPCODE**

C.D. NO. OR USED FOR: **ITALIAN VISA FEE**

NEGOTIABLE ONLY IN THE U.S. AND POSSESSIONS SEE REVERSE WARNING

FROM: **YOUR NAME** CLERK: 0011

ADDRESS: **YOUR ADDRESS**

**YOUR PHONE NUMBER**

000000000000 000000000000

## 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.** Syracuse University students will receive this document from Syracuse Abroad.

## 8. 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, confirmation that you purchased the flight, and your legal name on the confirmation.

Flight information will be shared with you by late April. If you have your visa appointment before then contact [syrflorence@syr.edu](mailto:syrflorence@syr.edu) so we can help you with this requirement.

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

**You're confirmed!**

Date issued: Tuesday, September 02, 2014

Confirmation code:  
**BDPQ758**

Scan barcode for boarding pass

Trip details: [Download to calendar](#)

**DEPART**

**JFK → FRA** New York City to Frankfurt (January 11, 2015)  
 Flight: 5A3796      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: 14 2938      Aircraft: 737  
 Arrive: 6:17pm      Cabin: Coach  
 Meal: ---      Seat: 17C

---

**RETURN**

**FLR → FRA** Florence to Frankfurt (April 30, 2015)  
 Flight: 148473      Travel Time: 3h 00m  
 Depart: 9:00am      Aircraft: 737  
 Arrive: 12:00pm      Cabin: Coach  
 Meal: ---      Seat: 17D

3 hour layover FRA

Syracuse Airways
Your Reservations

**FRA → JFK** Frankfurt to New York City (April 30, 2015)  
 Flight: 5A2846      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           |
| <b>Total</b>   | <b>\$1,430</b> |

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



## 9. Prepaid Self Addressed Envelope

If you would like your passport/visa returned to you by mail you will need to provide USPS or Fed Ex envelope with **a tracking number**, pre-paid and self-addressed. Please be advised that ALL return envelopes provided to the consulate must be self-addressed. This means that you must write your own name and address as the sender as well as the receiver. Even though the envelope you provide will be mailed from the consulate, the Consulate's name and address should NOT be written anywhere on the return label and envelope.

We suggest that you **save your tracking number** to be able to track when your passport is mailed to you with your visa.

