

Spring 2010 visa application
Miami

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Stamp Embassy or
Consulate

Application for Schengen Visa

This application form is free

1. Surname(s) (family name(s)) <i>Last Name</i>		FOR EMBASSY/ CONSULATE USE ONLY Date application : File handled by : Supporting documents: <input type="checkbox"/> Valid passport <input type="checkbox"/> Financial means <input type="checkbox"/> Invitation <input type="checkbox"/> Means of transport <input type="checkbox"/> Health insurance <input type="checkbox"/> Other :
2. Surname(s) at birth (earlier family name(s)) <i>First Name</i>		
3. First names (given names)		
4. Date of birth (year-month-day) <i>YY/MM/DD</i>	5. ID-number (optional)	
6. Place and country of birth <i>city, state, country</i>		
7. Current nationality/ies <i>Country of passport</i>		
8. Original nationality (nationality at birth)		
9. Sex <input type="checkbox"/> Male <input type="checkbox"/> Female <i>check one</i>	10. Marital status : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widow(er) <input type="checkbox"/> Other <i>check one</i>	
11. Father's name <i>Last, First</i>	12. Mother's name <i>Last, First</i>	
13. Type of passport <input checked="" type="checkbox"/> National passport <input type="checkbox"/> Diplomatic passport <input type="checkbox"/> Service passport <input type="checkbox"/> Travel document (1951 Convention) <input type="checkbox"/> Alien's passport <input type="checkbox"/> Seaman's passport <input type="checkbox"/> Other travel document (please specify): <i>check one</i>		
14. Number of passport # # #	15. Issued by <i>city, state, country of governing body</i>	
16. Date of issue <i>Day/Month/Year</i>	17. Valid until <i>Day/Month/Year</i>	
18. If you reside in a country other than your country of origin, have you permission to return to that country? <input type="checkbox"/> No <input type="checkbox"/> Yes, (number and validity)		
* 19. Current occupation <i>Student</i>		
* 20. Employer and employer's address and telephone number. For students, name and address of school. <i>New York University, 110 E 14th Street, NY, NY 10003, USA 212-998-4433</i>		
21. Main destination <i>Florence</i>	22. Type of Visa : <input type="checkbox"/> Airport transit <input type="checkbox"/> Transit <input type="checkbox"/> Short stay <input checked="" type="checkbox"/> Long stay	23. Visa : <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Collective
24. Number of entries requested <input type="checkbox"/> Single entry <input type="checkbox"/> Two entries <input checked="" type="checkbox"/> Multiple entries	25. Duration of stay Visa is requested for: <i>109</i> days	Characteristics of Visa : <input type="checkbox"/> LTV <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C <input type="checkbox"/> D <input type="checkbox"/> D + C
26. Other visas (issued during the past three years) and their period of validity <i>list all visas in passport</i>		Number of entries : <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> Multiple
27. In the case of transit, have you an entry permit for the final country of destination? <input type="checkbox"/> No <input type="checkbox"/> Yes, valid until: Issuing authority:		Valid from To

most likely type

us department of state

* 28. Previous stays in this or other Schengen states Valid for
list any relevant stamps in passport

* The questions marked with * do not have to be answered by family members of EU or EEA citizens (spouse, child or dependent ascendant). Family members of EU or EEA citizens have to present documents to prove this relationship.

29. Purpose of travel
 Tourism Business Visit to Family or Friends Cultural/Sports Official Medical reasons
 Other (please specify): *Study* FOR EMBASSY / CONSULATE USE ONLY

* 30. Date of arrival *January 19, 2010* * 31. Date of departure *May 7, 2010*
 * 32. Border of first entry or transit route *Lanover (ex. Veneto Milan)* * 33. Means of transport *air*

* 34. Name of host or company in the Schengen states and contact person in host company. If not applicable, give name of hotel or temporary address in the Schengen states
 Name *NYU in Florence* Telephone and telefax *39-055-5007-450*
 Full address *via Bolgnese 106, 50139 Florence, Italy* e-mail address *Florence.studentlife@nyu.edu*

* 35. Who is paying for your cost of travelling and for your costs of living during your stay?
 (Myself) Host person/s Host company. (State who and how and present corresponding documentation): *parent (name) - if account is in their name*

* 36. Means of support during your stay
 Cash Traveller's cheques Credit cards Accommodation Other:
 Travel and/or health insurance. Valid until: *anticipated graduation date (month/year)*

37. Spouse's family name 38. Spouse's family name at birth
 39. Spouse's first name 40. Spouse's date of birth 41. Spouse's place of birth
 42. Children (Applications must be submitted separately for each passport)
 Name First name Date of birth
 1
 2
 3

43. Personal data of the EU or EEA citizen you depend on. This question should be answered only by family members of EU or EEA citizens.
 Name First Name
 Date of Birth Nationality Number of passport
 Family relationship: of an EU or EEA citizen

44. I am aware of and consent to the following: any personal data concerning me which appear on this visa application form will be supplied to the relevant authorities in the Schengen states and processed by those authorities, if necessary, for the purposes of a decision on my visa application. Such data may be input into, and stored in, databases accessible to the relevant authorities in the various Schengen states.
 At my express request, the consular authority processing 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 altered or deleted, in particular, should they be inaccurate, in accordance with the national law of the state concerned.
 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 Schengen state which deals with the application.
 I undertake to leave the territory of the Schengen states upon the expiry of the visa, if granted.
 I have been informed that possession of a visa is only one of the prerequisites for entry into the European territory of the Schengen states. 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 the Schengen Implementing Convention and am thus refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Schengen states.

45. Applicant's home address *Permanent Address* 46. Telephone number *#*
 47. Place and date of signing *(ex. NY, NY 10/18/09)* 48. Signature (for minors, signature of custodian/guardian) *Your Signature*

(Account using for proof of financial means is in your name leave blank)