Embassy of Italy
Nairobi

Harmonised application form

Application for Schengen Visa

This application form is free

PHOTO

Family members of EU, EEA, CH citizens or of UK nationals who are beneficiaries of the EU-UK Withdrawal agreement shall not fill in fields No 21, 22, 31, 32 and 33 (marked with*).

Fields 1–3 shall be filled in in accordance with the data in the travel document.

1. Surname (Family name): _____

2. Surname at birth (Former family name(s)): _____

3. First name (s) (Given name(s)): _____

4. Date of birth (day- month-year): _____

5. Place of birth: _____

6. Country of birth: _____

7. Current nationality: _____

Nationality at birth, if different: _____

Other nationalities: _____

8. Sex:
☐ Male
☐ Female
☐ Other

9. Civil status:
☐ Single ☐ Married ☐ Registered Partnership
☐ Separated ☐ Divorced ☐ Widow(er) ☐ Other (please specify): _____

10. Parental authority (in case of **MINORS**)/legal guardian (surname, first name, address, if different from applicant's, telephone No, email address, and nationality): _____

11. National identity number, where applicable: _____

12. Type of travel document:
☐ Ordinary passport ☐ Diplomatic passport ☐ Service passport ☐ Official passport ☐ Special passport
☐ Other travel document (please specify): _____

13. Number of travel document: _____ 14. Date of issue: _____ 15. Valid until: _____ 16. Issued by (country): _____

17. Personal data of the **family member who is an EU, EEA, CH citizen or a UK national** who is a beneficiary of the EU-UK Withdrawal agreement, if applicable: _____

Surname (Family name): _____ First name(s) (Given name(s)): _____

Date of birth (day-month-year): _____ Nationality: _____ Number of travel document or Id card: _____

18. Family relationship with an EU, EEA, CH citizen or a UK national who is a beneficiary of the EU-UK Withdrawal agreement, if applicable:
spouse ☐ child ☐ grandchild ☐ dependent ascendant ☐ registered partnership ☐ other:

19. Applicant's home address: Telephone no.:
Email address:

20. Residence in a country other than the country of current nationality: ☐ No
☐ Yes. Residence permit or equivalent _____No. _____ Valid until _____

21. * Current occupation: _____

22. * Employer _____

Employer's address and telephone number. (For students, name and address of educational establishment):

23. Purpose(s) of the journey:
☐ Tourism ☐ Business ☐ Visiting family or friends Cultural ☐ Sports ☐ Official visit ☐ Medical reasons
☐ Study ☐ Airport transit ☐ Other (please specify): _____

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Date of application: _____

Application number: _____

Application lodged at:
☐ Embassy/consulate
☐ Service provider
☐ Commercial intermediary
☐ Border (Name) _____
☐ Other: _____

File handled by: _____

SUPPORTING DOCUMENTS:
☐ Travel document
☐ Means of subsistence
☐ Invitation
☐ TMI
☐ Means of transport
☐ Other: _____

VISA DECISION:
☐ Refused
☐ Issued:
☐ A
☐ C
☐ LTV
☐ Valid
☐ From:
☐ Until:

NUMBER OF ENTRIES:
☐ 1 ☐ 2
☐ Multiple

Number of days: _____

24. Additional information on purpose of stay: _____

25. Member State of main destination (and other Member States of destination, if applicable): _____

26. Member State of first entry: _____

27. Number of entries requested: ☐ Single entry ☐ Two entries ☐ Multiple entries

28. Intended date of arrival of the first intended stay in the Schengen area: _____
Intended date of departure from the Schengen area after the first intended stay: _____

29. Fingerprints collected previously for the purpose of applying for a Schengen visa: ☐ No ☐ Yes
Date, if known _____ Visa sticker number, if known _____

30. Entry permit for the final country of destination, where applicable:
Issued by _____ Valid from _____ until _____

31. *Surname and first name of the inviting person(s) in the Member State(s). If not applicable, name of hotel(s) or temporary accommodation(s) in the Member State(s):
_____

Address and e-mail address of inviting person(s)/hotel(s)/temporary accommodation(s): _____

Telephone no.: _____

32. *Name and address of inviting company/organisation: _____
_____

Surname, first name, address, telephone no., and e-mail address of contact person in company/organisation: _____
_____

Telephone no.: _____

33. *Cost of travelling and living during the applicant's stay is covered:

☐ by the applicant himself/herself

Means of Support:
- ☐ Cash
- ☐ Traveller's cheques
- ☐ Credit card
- ☐ Pre-paid accommodation
- ☐ Pre-paid transport
- ☐ Other (please specify): _____

☐ by a sponsor (host, company, organisation), please specif
☐ referred to in field 30 or 31
☐ other (please specify): _____

Means of Support:
- ☐ Cash
- ☐ Accommodation provided
- ☐ All expenses covered during the stay
- ☐ Pre-paid transport
- ☐ Other (please specify): _____

34. Surname and first name of the person filling in the application form, if different from the applicant:
_____

Address and e-mail address of the person filling in the application form: _____

Telephone no.: _____

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

Applicable in case a multiple-entry visa is applied:
I am aware of the need to have an adequate travel medical insurance for my first stay and any subsequent visits to the territory of Member States.

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 application; and any personal data concerning me which appear on the application form, as well as my fingerprints and my photograph will be supplied to the relevant authorities of the Member States and processed by those authorities, for the purposes of a decision on my 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) for a maximum period of five years, during which it will be accessible to the visa authorities and the authorities competent for carrying out checks on visas at external borders and within the Member States, 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, of examining an asylum application and of determining responsibility for such examination. 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 of other serious criminal offences. The authority of the Member State responsible for processing the data is: **The Ministry of Foreign Affairs and International Cooperation (Piazzale della Farnesina 1, 00135 Roma, http://www.esteri.it, dgit6@esteri.it).**
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 relating to me processed 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 Member State concerned. The national supervisory authority of that Member State is the **Italian Authority for Data Protection (Piazza Montecitorio 121, 00186 Roma, http://www.garanteprivacy.it; tel.: +39 06 696771)**.
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.
I undertake to leave the territory of the Member States before 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 Member 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 6(1) of Regulation (EU) No 2016/399 (Schengen Borders Code) and I am therefore refused entry. The prerequisites for entry will be checked again on entry into the European territory of the Member States.

Place and date: _____

Signature (signature of parental authority/legal guardian, if applicable _____