

NON-EU STUDENTS ADMITTED TO BOCCONI UNIVERSITY (a.y. 2010-2011)

DETAILS ABOUT THE ITALIAN EMBASSY WHERE THE VISA PROCESS WILL BE COMPLETED

I undersigned (Name, Surname) _____
born in _____ (City) _____ (Country), on ___/___/___,
admitted to the Bocconi Program _____
holding a non-eu Citizenship _____, declare that I will
complete the student visa process at the following Italian diplomatic authority:



Italian Embassy/ Consulate of:	
Flag the office/ offices you got in touch with	<input type="radio"/> "Ufficio Visti" (Visa Office) <input type="radio"/> "Istituto Italiano di Cultura" (Italian Institute of Culture – IIC) <input type="radio"/> "Ufficio Studenti" (Student Office) <input type="radio"/> Other Office _____
Full Address of the Italian Embassy/ Consulate	
City of the Italian Embassy/ Consulate	
Country of the Italian Embassy/ Consulate	
Fax number of the Italian Embassy/ Consulate	
Contact person (if available)	

This form must be sent by fax (+39 02 5836 2222) or by email (admissionoffice@unibocconi.it).

With all the information concerning the right Embassy/Consulate, we will be able to help you easily through all the process, sending a formal acceptance letter, stating your admission to our University.

Date _____

Signature _____