Consulate General of Italy - Los Angeles



National (D) visa application form

This form is free of charge

1. **Surname (Family name)**/ (x) **PAVEL**

2. **Surname at birth (Former family name(s))** / (x) **TANVIR HOSSEN**

3. **First name(s)** / (x) **MD**

4. **Date of birth (day-month-year)** **20 OCT 2003**

5. **Place of birth** **MAGURA**

6. **Country of birth** **BANGLADESH**

7. **Current nationality** **BANGLADESH**

Nationality at birth, if different **BANGLADESH**

8. **Sex:**

☑ **Male**
☐ **Female**.

9. **Marital status:**

☐ **Single** ☐ **Married**
☐ **Separated** ☐ **Divorced**
☐ **Widow(er)**
☑ **Other (please specify)**

10. **For minors: surname, first name, address (if different from the applicant's) and nationality of parental authority/legal guardian:**

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. Numer of travel document	14. Date of issue.(day-month-yr)	15. Valid until (day-month-yr)	16. Issued by
A11480676	**05 SEP 2023**	**04 SEP 2033**	**05 MAR 2025**

17. **Appplicant's home address and e-mail address** .....**italyvisa@gmail.com**

Telephone number(s) **+8801********

18. **Are you residing in a country other than the country of your current nationality:**
☐ **No**
☑ **Yes. Residence permit or equivalent:**.....: ……**N.**……. **Valid until** ……..

19. **Current occupation**

20. **Employer, employer's address and telephone number. For students, name and address of educational institution.**

F-852369741

For official use only

Data della domanda:

I-852147963
Numero della domanda di visto:
E-85236547

Domanda presentata presso:
☑ **Ambasciata/Consolato**
☑ **Centro comune**
☑ **Fornitore di servizi**
☑ **Intermediario commerciale**
☑ **Altro**

Nome:

Responsabile della pratica:

Nome di chi ha ricevuto la pratica allo sportello:

Documenti giustificativi:
☑ **Documento di viaggio**
☑ **Mezzi di sussistenza**
☑ **Invito**
☑ **Mezzi di trasporto**
☑ **Assicurazione sanitaria di viaggio**
☑ **Altro**

Decisione relativa al visto:
☑ **Rifiutato**
☑ **Rifiutato per segnalazione SIS non cancellabile.**
☑ **Pratica Sospesa**
☑ **Rilasciato**

Tipo di visto:
☑ **D**

☑ **Valido:**

dal ……..

21. **Purpose of travel:**	**al…….**
☐ **Joining family member/ Accompanying family member** ☐ **Religious activity** ☐ **Sport** ☐ **Mission** ☐ **Diplomatic** ☐ **Medical reasons** ☐ **Study** ☐ **Adoption** ☐ **Subordinate work** ☐ **Autonomous work** ☑ **Other (specify)/**.....…….	**Numero di ingressi:** ☐ **1** ☐ **2** ☑ **Multipli**

(x) ***Provide the information as indicated in the travel document.***

22. **City of destination**	23. **Schengen country of first entry**	
24. **Number of entries requested:** ☐ **One** ☐ **Two** ☑ **Multiple**.	25. **Duration of stay. Indicate the number of days (max. 365 days)**	
26. **Schengen visas issued in the past three years**: ☐**None** ☑ **Yes. Date(s) of validity: from ...**…….. **to**..……		
27. **Fingerprints previously taken for a Schengen visa application:** ☐**No** ☑ **Yes. Indicate date if known:**……		
28. **Number of the Nullaosta issued for a Joining family member visa/Accompanying family member visa/ Subordinate work visa (only when required by the regulations governing the type of visa requested)**…… **Issued by the SUI of the city of** …… **Valid from** ……..**until**……..		
29. **Intended date of arrival in the Schengen area**	30. **Intended date of departure from the Schengen area (only for visas valid from 91days to 364 days)**	
31. **Name of the person who requested the family reunion visa, or the name of the employer. Indicate your address in Italy, if it is visa for Adoption, Religious Activities, Medical Reasons, Sport, Study, Mission.**		
Address and e-mail address of the person(s) who requested the family reunion visa, or the name of the employer.	**Telephone number and fax number of the person(s) who requested the family reunion visa, or the name of the employer.**	
32. **Name and address of the inviting company/ organization.**	**Telephone number and fax number of the company/ organization.**.	
Name, address, telephone number, fax number and e-mail address of the contact person of the company/ organization.		
33. **The applicant's expenses for travel and stay are the responsibility of:**		
☐ **the applicant**. **Means of support:** ☐ **Cash** ☐ **Traveller's cheques** ☐ **Credit cards** ☐ **Prepaid accomodation** ☐ **Prepaid transportation** ☑ **Other (specify)**……. INFORMATION NOT NECESSARY FOR THE FOLLOWING VISAS: Joining Family Member, Accompanying Family Member, Subordinate Work,Autonomous Work, Mission, Diplomatic, Adoption.	☐ **of the sponsor (host, company, organization), specify:**…… …….. **referred to in field n. 31 or 32.** ☐**other (specify)**.....:…… **Means of support:** ☐ **Cash** ☐ **Accommodation provided** ☐ **All expenses covered during the stay**.. ☐ **Prepaid transportation** ☑ **Other (specify)** ……..	

34. **Personal data of the family member who is a citizent of the EU, EEA or CH:**

Surname (family name).	**First name(s)**	
MD	**TANVIR HOSSEN PAVEL**	
Date of birth	**Nationality**	**Number of travel document or ID card**
20 OCT 2003	**BANGLADESH**	**A11480676**

35**. Family relationship with a EU, EEA or CH citizen**:

☐ **spouse** ☐ **son/daughter**

☑ **other direct ascendant –grandchild** ☐ **dependent ascendant**

36. **Place**	37. **Signature**
MAGURA	**(Signature of parent or legal guardian if applicant is a minor)**
Date	TANVIR
05 MAR 2025	

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

I am aware of and consent to the following: that the collection of the data required by this application, the taking of my photograph and, if applicable, the taking of my fingerprints are mandatory for the examination of the visa application, and that the personal data concerning me which appears on the visa application form, as well as my fingerprints and my photograph will be supplied to the relevant Italian authorities and processed by those authorities for the purpose of a decision on my visa application.

Such data, as well data concerning the decision taken on my application or a decision whether to annul or revoke an issued visa will be entered into and stored in the visa information system of the Italian Embassy/Consulate and of the Italian Ministry of Foreign Affaire.

Such data will be accessible to the national authorities responsible for visas. Furthermore, such data will be accessible to the Schengen authorities competent for carrying out checks on visas at external borders, to the immigration and asylum authorities of the Member States (for the purpose of verifying whether the conditions for the legal entry into, the stay and residence on the territory of the Member States are fulfilled, of identifying persons who do not or no longer fulfil these conditions), to the authorities of the Member States responsible for examining of an asylum application. Under certain conditions the data will also be available to designated authorities of the Member States and to Europol for the purpose of the prevention, detection and investigation of terrorist offences and other serious criminal offences.

I am aware that I have the right to obtain notification of the data relating to me recorded in the visa information system, and the right to request that inaccurate data relating to me be corrected and that data relating to me processed unlawfully be deleted. At myrequest, the authority examining my application will inform me of the manner in which I may exercise my right to verify my personal data, and have them corrected or deleted, including the related remedies according to the national legislation. The responsible national authority is the "Garante per la Protezione dei Dati Personali".

I declare that all the data provided by me are complete and correct. I am aware that 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 Italian Representative (article 331 c.p.p.).

The mere fact that a visa has been granted does not mean that I will be entitled to compensation if I fail to comply with the relevant provisions of Article 5, paragraph 1 of Regulation EU n. 562/2006 (Schengen Borders Code) and of Article 4 of Italian Law 286/98 and for said reasons I will be refused entry.

ANNOTAZIONI (riservato all'Ufficio)

Place **MAGURA** **Date** **05 MAR 2025**	**Signature** **(Signature of parent or legal guardian if applicant is a minor)** MICKEL PUAL