

APPLICATION FOR ITALIAN CITIZENSHIP JURE SANGUINIS

THE UNDERSIGNED (last/first/middle name) _____
 City of Birth: _____ Date of Birth (DD/MM/YYYY) _____
 State/Province of birth: _____
 Current address: _____
 Telephone. Home: _____ Business: _____ Cell: _____
 Married? YES NO Divorced? YES NO
 City and Date of Marriage _____
 Spouse's Full Name, city & date of birth (please use maiden name): _____
 Date and place of US NATURALIZATION if Applicable: _____
EMAIL ADDRESS : _____

CHILDREN UNDER 18 YEARS OLD

Name	City of Birth	Date of Birth (DD/MM/YYYY)
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

REQUESTS THAT HIS/HER RIGHT TO ITALIAN CITIZENSHIP BE RECOGNIZED AND, THEREFORE, DECLARES TO BE A DESCENDANT OF:

<u>GREAT GRANDFATHER</u> Last Name: _____ First Name/s: _____ City of Birth: _____ Date of Birth (DD/MM/YYYY): _____ Date and City of Marriage: _____ Date and city of death: _____	<u>GREAT GRANDMOTHER</u> Maiden Name: _____ First Name/s: _____ City of Birth: _____ Date of Birth (DD/MM/YYYY): _____ Date and city of death: _____
<u>NATURALIZATION</u>	
Certificate No.: _____	
City: _____	
Date of Naturalization (DD/MM/YYYY): _____	

<u>GRANDFATHER</u> Last Name: _____ First Name/s: _____ City of Birth: _____ Date of Birth (DD/MM/YYYY): _____ Date and City of Marriage: _____ Date and city of death: _____	<u>GRANDMOTHER</u> Maiden Name: _____ First Name/s: _____ City of Birth: _____ Date of Birth (DD/MM/YYYY): _____ Date and city of death: _____
<u>NATURALIZATION</u>	
Certificate No.: _____	
City: _____	
Date of Naturalization (DD/MM/YYYY): _____	

<u>FATHER</u> Last Name: _____ First Name/s: _____ City of Birth: _____ Date of Birth (DD/MM/YYYY): _____ Date and City of Marriage: _____ Date and city of death: _____	<u>MOTHER</u> Maiden Name: _____ First Name/s: _____ City of Birth: _____ Date of Birth (DD/MM/YYYY): _____ Date and city of death: _____
<u>NATURALIZATION</u>	
Certificate No.: _____	
City: _____	
Date of Naturalization (DD/MM/YYYY): _____	

Attached (please mark): **FORM 1** DECLARATION THAT I NEVER RENOUNCED ITALIAN CITIZENSHIP, LISTING ALL MY PLACES OF RESIDENCE **FORM 3 OR 4** DECLARATION THAT MY **FATHER** **MOTHER** **GRANDFATHER** **GRANDMOTHER** (PLEASE MARK APPROPRIATE BOXES) NEVER RENOUNCED ITALIAN CITIZENSHIP, LISTING ALL PLACES OF RESIDENCE
 The undersigned declares that he/she has read the privacy statement concerning citizenship requests, in accordance with the Data Protection Regulation (EU) 2016/679.

DATE _____ SIGNATURE _____

must be notarized