

**APPLICATION FOR SOGGIORNO PERMIT**  
FOREIGNERS' STATEMENT TO STAY

**PLEASE PRINT**

(Day, Month, Year format. Example: 23 Oct 2016)

**CIVILIAN'S INFORMATION:**

- a. Last Name (Cognome) \_\_\_\_\_
- b. First Name, Middle Name (Primo nome e secondo) \_\_\_\_\_
- c. *Father's Last, First, Middle Name (Cognome e Nome del padre)* \_\_\_\_\_
- d. *Mother's Maiden Name, First, Middle Name (Cognome e Nome della madre)* \_\_\_\_\_
- e. Marital Status of **applicant**: (Stato Civile) \_\_\_\_\_
- f. Date of Birth –**Day-Month Year**-(data di nascita) \_\_\_\_\_
- g. Place of birth –**City-State**-(luogo di nascita) \_\_\_\_\_
- h. Complete Physical Address in Italy **NOT YOUR BOX #**: (*Street, Town, Province*) (*indirizzo*) \_\_\_\_\_
- i. Nationality (*nazionalita'*) \_\_\_\_\_
- j. School Education (elementary/Jr high/high school/degree etc.) \_\_\_\_\_
- k. Profession/working status \_\_\_\_\_
- l. Color of eyes (occhi) \_\_\_\_\_ Color of hair (capelli) \_\_\_\_\_
- m. Height (altezza) \_\_\_\_\_
- n. Any special body marks (scars, tattoos, different color eyes, etc) (*imperfezioni*) \_\_\_\_\_
- o. Home/Cell phone: \_\_\_\_\_ Personal Email: \_\_\_\_\_

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- p. Previous Physical Address \_\_\_\_\_
- q. Date entered Italy: \_\_\_\_\_ Port of entry(place stamped on Passport) \_\_\_\_\_  
**(Day, Month, Year)**  
Passport No: \_\_\_\_\_ Place of issue: \_\_\_\_\_  
Date of issue: \_\_\_\_\_ Date of expiration: \_\_\_\_\_
- Visa No: \_\_\_\_\_ Issued in: \_\_\_\_\_ Date of Issue: \_\_\_\_\_  
Expiration Date: \_\_\_\_\_ Reason: **MISSION**

**SPONSOR'S INFORMATION:**

- a. Name (Last, First, Middle): \_\_\_\_\_ SSN: \_\_\_\_\_
- b. Grade: \_\_\_\_\_ Citizenship: \_\_\_\_\_ Unit: \_\_\_\_\_
- c. Duty/Work phone: \_\_\_\_\_ Home/Cell phone: \_\_\_\_\_
- d. DEROS: \_\_\_\_\_ PSC/Box no: \_\_\_\_\_
- e. Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_
- f. Personal Email: \_\_\_\_\_

**ADDITIONAL DEPENDENTS INFORMATION:**

- a. Name: (Last, First, Middle) \_\_\_\_\_  
Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_
- b. Name:(Last, First, Middle ) \_\_\_\_\_  
Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_
- c. Name:(Last, First, Middle) \_\_\_\_\_  
Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_
- d. Name:(Last, First, Middle) \_\_\_\_\_  
Place of birth: \_\_\_\_\_ Date of birth: \_\_\_\_\_

# SOGGIORNO REQUIREMENTS

❖ **SOGGIORNO APPLICATIONS MUST BE APPLIED FOR WITHIN 8 DAYS OF ARRIVAL IN COUNTRY**

ALL MILITARY CIVILIAN DEPENDENTS, CIVILIAN EMPLOYEES AND DEPENDENTS ARE REQUIRED TO OBTAIN A SOGGIORNO. (To include DoD, DoDDS, NAF employees, and contractors)

## **DOCUMENTS REQUIRED:**

- COMPLETED SOGGIORNO APPLICATION
- NO-FEE/OFFICIAL PASSPORTS WITH A VALID MISSIONE VISA
- CODICE FISCALE (18 YEARS and OLDER ONLY)
- MILITARY ORDERS INCLUDING DEPENDENT(S)/DOCUMENTS OF EMPLOYMENT
- EVERYONE MUST BE PRESENT TO TAKE PHOTOS

## **ADDITIONAL INFORMATION:**

- IT IS ADVISABLE **NOT** TO CHANGE SURNAMES WHILE STATIONED IN ITALY. NOTIFY THE SOGGIORNO OFFICE IMMEDIATELY IN CASE THAT A SURNAME CHANGE OCCURS
- NOTIFY OUR OFFICE IMMEDIATELY IF THERE'S AN ERROR IN YOUR PASSPORT OR VISA, IF YOU'VE CHANGED NATIONALITIES, OR ARRIVED PRIOR TO YOUR VISA'S EFFECTIVE DATE
- IF THE PARENT IS A **NON-U.S. CITIZEN, MIL TO MIL** OR THE CHILD IS **ABOVE THE AGE OF 14**, THEN THEY WILL HAVE **THEIR OWN SOGGIORNO APPLICATION**



**Book now**

**BRING ALL DOCUMENTS TO BLDG 1413 ROOM 142  
AFTER YOU HAVE SCHEDULED AN APPOINTMENT. ALL THE REQUIRED DOCUMENTS NEEDED  
ARE NEEDED AT THE APPOINTMENT. NO WALK-INS ALLOWED.**

**DSN: 632-4802/4806  
COMM: 0434-30-4802/4806**

- ❖ **SOGGIORNO APPLICATIONS MUST BE APPLIED FOR WITHIN 8 DAYS OF ARRIVAL IN  
COUNTRY**
- ❖ **DO NOT CROSS ANY BORDERS UNTIL YOU HAVE YOUR SOGGIORNO IN HAND**