

**APPLICATION FOR ITALIAN CITIZENSHIP JURE SANGUINIS**

Form 1

Il/La sottoscritto/a \_\_\_\_\_

**The undersigned** \_\_\_\_\_ **(Last/First/Middle Name)**

Nato/a il \_\_\_\_\_ a \_\_\_\_\_

**Born on (dd/mm/yyyy)** \_\_\_\_\_ **Birth Place (City or town, State)**

residente in \_\_\_\_\_

**Residential address**

Città \_\_\_\_\_ Zip \_\_\_\_\_ e-mail: \_\_\_\_\_ **City**

**Zip code**

**Telephone: Home:** \_\_\_\_\_ **Business:** \_\_\_\_\_ **Cell.:** \_\_\_\_\_

**FIGLI MINORENNI – CHILDREN UNDER 18 YEARS OLD**

Name \_\_\_\_\_ City of Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

**CHIEDE il riconoscimento della cittadinanza italiana quale straniero di ceppo italiano:  
REQUESTS TO BE RECOGNIZED AS ITALIAN CITIZEN AND, THEREFORE, DECLARES TO BE A DESCENDANT OF:**

**GREAT GRAND FATHER**

Last Name: \_\_\_\_\_

First Name/s: \_\_\_\_\_

City of Birth: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

Date and City of Marriage: \_\_\_\_\_

**GREAT GRANDMOTHER**

Maiden Name: \_\_\_\_\_

First Name/s: \_\_\_\_\_

City of Birth: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

**NATURALIZATION**

Certificate No: \_\_\_\_\_

City: \_\_\_\_\_

Date (DD/MM/YYYY): \_\_\_\_\_

**GRAND FATHER**

Last Name: \_\_\_\_\_

First Name/s: \_\_\_\_\_

City of Birth: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

Date and City of Marriage: \_\_\_\_\_

**GRANDMOTHER**

Maiden Name: \_\_\_\_\_

First Name/s: \_\_\_\_\_

City of Birth: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

**NATURALIZATION**

Certificate No: \_\_\_\_\_

City: \_\_\_\_\_

Date (DD/MM/YYYY): \_\_\_\_\_

**FATHER**

Last Name: \_\_\_\_\_

First Name/s: \_\_\_\_\_

City of Birth: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

Date and City of Marriage: \_\_\_\_\_

**MOTHER**

Maiden Name: \_\_\_\_\_

First Name/s: \_\_\_\_\_

City of Birth: \_\_\_\_\_

Date of Birth (DD/MM/YYYY): \_\_\_\_\_

**NATURALIZATION**

Certificate No: \_\_\_\_\_

City: \_\_\_\_\_

Date (DD/MM/YYYY): \_\_\_\_\_

**Attached (please mark appropriate box):**

FORM 2 Declaration that I never renounced Italian citizenship, listing all my places of residence);

FORM 3 and/or  FORM 4 Declaration that my  FATHER  MOTHER  GRANDFATHER  GRANDMOTHER

GREAT GRANDFATHER  GREAT GRANDMOTHER never renounced Italian citizenship, listing all places of residence)

DATE (DD/MM/YYYY): \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

To be signed before a Consular Officer

**I, the undersigned, hereby declare that I read and understood the information about the protection of PII (personal identifiable information) with reference to consular services, in accordance with the General Rules on Data Protection (EU) 2016/679.**

### DECLARATION OF APPLICANT

The undersigned \_\_\_\_\_  
born in (city of birth/State)  
\_\_\_\_\_ on \_\_\_\_\_  
address \_\_\_\_\_

#### DECLARES

Under his/her responsibility and conscious of legal consequences in case of false statement that he/she **HAS NEVER RENOUNCED ITALIAN CITIZENSHIP** before any Italian Authority. Declares that, starting from the age of 18, has resided in:

( list Cities/States and, approximately, the period ):

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

etc....

Date \_\_\_\_\_

Signature \_\_\_\_\_

**Please note:** must be signed before a Consular Officer.

Please enclose photocopy of a valid document of identification: YOUR U.S. PASSPORT, DRIVER'S LICENSE and a bill or bank statement.

If you are not U.S citizen: a proof of your permanent address, copy of the driver's license and any bill or bank statement);

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DECLARATION OF LIVING ITALIAN ASCENDANT

The undersigned \_\_\_\_\_  
born in (city of birth/State) \_\_\_\_\_ on \_\_\_\_\_  
address: \_\_\_\_\_ Tel. \_\_\_\_\_  
: \_\_\_\_\_

(check the one that applies):  FATHER  MOTHER  GRANDFATHER  GRANDMOTHER of

THE APPLICANT (APPLICANT'S LAST/FIRST/MIDDLE NAME)

\_\_\_\_\_ in reference TO THE APPLICANT'S REQUEST for recognition of Italian citizenship "*jure sanguinis*"

DECLARES

that he/she **HAS NEVER RENOUNCED ITALIAN CITIZENSHIP** before any Italian Authority and that he/she, starting from the age of 18, has resided in:

(list Cities/States and approximate years and use a second sheet of paper if needed):

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_
- 5. \_\_\_\_\_

etc.....

Date \_\_\_\_\_

Signature

\_\_\_\_\_

**Please note:** Signature must be notarized. Otherwise, this declaration must be signed before a consular officer.

Please enclose photocopy of a valid document of identification: YOUR U.S. PASSPORT, DRIVER'S LICENSE and a bill or bank statement.

If you are not U.S citizen: a proof of your permanent address, copy of the driver's license and any bill or bank statement);

**DECLARATION CONCERNING THE ITALIAN DECEASED ASCENDANT**

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The undersigned \_\_\_\_\_

born in (city of birth/State) \_\_\_\_\_ on \_\_\_\_\_

address: \_\_\_\_\_

Tel. : \_\_\_\_\_

(check the one that applies): SON – DAUGHTER – GRANDSON – GRANDDAUGHTER

of ascendant (s) name(s)

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in reference his/her application for citizenship jure sanguinis

**DECLARES**

that to the best of his/her knowledge his/her ascendant(s) **HAS (HAVE) NEVER RENOUNCED ITALIAN CITIZENSHIP** before any Italian Authority and that, starting from the age of 18, the ascendant(s) resided in:

(list Cities/States and approximate years and use a second sheet of paper if needed):

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

etc.....

Date \_\_\_\_\_

Signature

\_\_\_\_\_

**Please note:** must be signed before a Consular Officer.

Please enclose photocopy of a valid document of identification: YOUR U.S. PASSPORT, DRIVER'S LICENSE and a bill or bank statement.

If you are not U.S citizen: a proof of your permanent address, copy of the driver's license and any bill or bank statement);

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