

AFFIDAVIT OF HEALTH INSURANCE COVERAGE

I, _____ born in _____

State of _____ on _____

Residing at _____

BEING FIRST DULY SWORN ON OATH, DEPOSE AND SAY:

- That within eight days of my arrival in Italy I will report to the Italian Questura (Police) for the issuance of my **PERMESSO DI SOGGIORNO** as required by the Italian Government for all foreigners residing in Italy for an extended period of time.
- That prior to appearing at the Questura, I will have purchased one of the following health insurances:
 - a) Insurance Policy with **I.N.A. ASSITALIA** .
 - b) Insurance Policy with a US private health insurance company that will cover me for the medical/hospitalization in line with the Italian Government standards *as specifies on the note **REQUIREMENTS FOR A STUDY VISA.***

Signature of the student

SIGNED BEFORE ME

ON _____

Signature _____

Seal of the Notary Public

I acknowledge that I have read the personal data protection notice on the subject of the issuance of visa, as set forth by the General Regulation (EU) 2016/679 on the Protection of Personal Data.

Date .../.../...

Signature.....