

**REQUEST FOR
DECLARATION OF VALUE
OF SCHOLASTIC AND ACADEMIC DEGREES OBTAINED IN THE UNITED STATES**

To the Consulate of Italy in Detroit:

I, _____
First name Last name
born in _____ **on** _____
City State/province Country day / month / year

Citizenship *non EU citizens who are legally residing in Italy must indicate their
visa/permit and its expiration date

Legal address:

Street / city / State-province / zip code Telephone (line and mobile)

E-mail address

have the intent to apply for (*circle the option that applies to you*):

A. Admission to an Italian University for continuation of studies or accreditation of foreign degrees.

B. Validation of foreign academic degrees for work related purposes in Italy.

Please list your school/academic career starting from the highest degree.

◇ _____
(highest **University degree**) degree name as it appears in English (*Bachelor, Master, PhD*) on the original document – name and location (city and State) of the academic institution issuing the degree.

◇ _____
(previous **University degree**, if any) degree name as it appears in English (*Bachelor, Master, PhD*) on the original document – name and location (city and State) of the academic institution issuing the degree.
MANDATORY for applicants holding higher University degrees

◇ _____
High school graduation diploma or equivalent - name and location (city and State) of the High School.
MANDATORY also for students holding University degrees.

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.

I Declare, under penalty of perjury, that the above stated facts are true and that I am aware of the criminal penalties against those who make misleading or false statements (art 76 of Presidential Decree 445/2000).

Date: _____

Signature: _____