

## DECLARATION OF FINANCIAL RESPONSIBILITY

I/we, the undersigned

Mr. ....  
(name, last name, place and date of birth, relationship with the applicant)

residing at .....

Mrs. ....  
(name, last name, place and date of birth, relationship with the applicant)

residing at .....

### **agree to pay for all the expenses incurred by the applicant**

.....  
(name, last name, place and date of birth of the applicant)

residing at .....

### **during his/her travel and stay**

from (date)..... to (date).....

reason of the trip .....  
(if “study” please fill up the following fields:)

to pursue his/her education by attending .....  
(name of academic institution)

located in .....  
(address of institution in Italy)

Attached you will find the required professional and financial information (i.e. last three months’ bank statements, recent letter from my employer specifying monthly salary, and any other pertinent information.)

Place and date.....

.....  
Signature

.....  
Signature

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*The above statements must be signed at the Visa Office of the Embassy of Italy in Ottawa with a valid photo I.D. with signature.  
Parent/s residing out of this consular jurisdiction must sign at the Italian Consulate of their/his/her Country of residence.*