

**DECLARATION OF ENTRY TO ITALY FROM A FOREIGN COUNTRY**

Natural persons entering Italy via rail, sea, air, or land transport are under obligation to

- declare their entry by sending an e-mail to [segreteria.uoisp@apss.tn.it](mailto:segreteria.uoisp@apss.tn.it) attaching the filled-in form and a copy of a form of ID
- observe a period of fiduciary self-isolation, including when asymptomatic, when travelling from countries under [list D](#) and [list E](#) published by the Ministry of Health, and communicate the date of start of the fiduciary self-isolation period to the APSS (*Provincial Health Authority*)' Prevention Department; once the period of self-isolation is over - according to the number of days prescribed under current legislation - in the absence of symptoms, the self-isolation period is deemed concluded and no additional communications are required from travellers;
- if symptoms are developed, travellers must inform their own GP; if the traveller is a tourist or visitor, they must contact the local emergency or tourist medical service. The onset of symptoms must also be communicated to the APSS' Prevention Department;

Should travellers require a self-isolation certificate in order to claim sickness-related leave for INPS (Italian National Institute of Social Security) purposes, they must specify so in the form.

Please note that agricultural and forestry workers are not required to claim sickness-related leave for INPS purposes as their work is subject to active quarantine.

For additional information or updates please visit the Ministry of Health's website at [www.salute.gov.it](http://www.salute.gov.it) or call the toll-free number 1 5 0 0 of the Ministry of Health.



**SELF-CERTIFICATION ISSUED PURSUANT TO ORDINANCE OF THE MINISTRY OF HEALTH,  
INFRASTRUCTURES, AND TRANSPORT, PUBLISHED 28 MARCH 2020, as amended**

I, the undersigned (Surname and Name) \_\_\_\_\_

born in \_\_\_\_\_ Country \_\_\_\_\_ on \_\_\_\_\_

resident in \_\_\_\_\_

with permanent/temporary address in Italy at \_\_\_\_\_

phone number \_\_\_\_\_

General Practitioner/Paediatrician of Free Choice (*do not fill in if traveller is a non-resident or a tourist*)

As a worker, I require a self-isolation certificate for my GP (CROSS OUT)  YES  NO

I am aware of the criminal penalties applicable in case of false declarations (Article 495 of the Criminal Code)

I declare under my own responsibility,

- that I have entered/returned to Italy from the following Country: \_\_\_\_\_
- that I have entered/returned to Italy on (day) \_\_\_\_\_
- reason for my entry to Italy \_\_\_\_\_
- Test taken within 48h/72h  (cross out)
- Date test was taken: \_\_\_\_\_
- Test result (negative or positive) \_\_\_\_\_
- that I am aware of the need to comply with the restrictive measures prescribed under the legislation in force, depending on the Country of origin
- that I am informed of the containment measures to prevent the spread of COVID19 (coronavirus) set out under Article 1, paragraph 1, of Ministerial Decree 120/2020, which require travellers, in this circumstance, to undergo a period of self-isolation at one's own place of residence/temporary stay (**excluding Countries in list "C"**) and to immediately inform the Prevention Department of Trento's APSS, hygiene and public health Operating Unit, of the onset of any symptoms in the manners indicated (\*)
- that I am aware that failure to comply with the provisions set out under Article 1, Paragraph 1, and Ministerial Decree 120/2020 (failure to provide a declaration of entry to Italy from a foreign Country and failure to communicate the onset of symptoms that may suggest infection from COVID19) are published under Article 650 of the Criminal Code
- that I am informed, pursuant to Article 13 of Regulation (EU) 2016/679) on personal data protection, and Article 14 of Law-Decree No. 14 of 9 March 2020 laying down special provisions within the scope of the Covid-19 state of emergency, that the personal data collected through this declaration shall be processed, including through automated tools, exclusively within the scope and for monitoring purposes.

Date \_\_\_\_\_

Signature \_\_\_\_\_

This form, with the attached copy of the traveller's form of ID must be sent to [segreteria.uoisp@apss.tn.it](mailto:segreteria.uoisp@apss.tn.it)

**(\*) In case of symptoms** of coronavirus infection (temperature, coughing, joint and muscle pain), alert your General Practitioner (tourists can contact the emergency or tourist medical service) and send an e-mail to [segreteria.uoisp@apss.tn.it](mailto:segreteria.uoisp@apss.tn.it) or alternatively call the prevention department on-call doctor at (+39) 3356428440. **Please do not contact the on-call doctor** to ask for information or updates; please check the Ministry of Health's website at [www.salute.gov](http://www.salute.gov) or call the toll-free number **1 5 0 0** of the Ministry of Health

**ATTACHMENTS:**

- non-authenticated photocopy or image of the traveller's currently valid form of ID