



UNIVERSITÀ  
CATTOLICA  
del Sacro Cuore

**English-taught  
Medicine and Surgery  
Degree Programme**

## **Income Statement Form**

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I, the Undersigned \_\_\_\_\_, hereby declare,  
for the purposes of my enrolment to the 1<sup>st</sup> Year of the English-taught Medicine and Surgery  
Degree Programme at Università Cattolica del Sacro Cuore, that either my personal or  
family income is generated in:

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*(please indicate herein the **Country** where your personal or family income is produced)*

Faithfully,

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*(Date and Signature)*