



RESIDENZA UNIVERSITARIA BIOMEDICA

FONDAZIONE COLLEGIO UNIVERSITARIO
S. CATERINA DA SIENA

To the Administration Board FONDAZIONE COLLEGIO UNIVERSITARIO S. CATERINA DA SIENA

I, the undersigned
Born in on
Resident in street
Country
Italian tax code, who will enroll, at the University of Pavia,

- in _____ year of the Bachelor's Degree Course in _____
- in _____ year of a Master's Degree Course/ Long Cycle Degree Course in _____
- in _____ year of a postgraduate course (PhD, medical graduate school, post lauream Master program) in _____

subject to the requirements of the Residenza regulation

REQUESTS

reconfirmation of the place assigned at the **Residenza Universitaria Biomedica** for the academic year **2025-2026**

Notifies that he/she is the holder of a free place entitled to _____

To this end

- attach financial documentation related to annual family income

Date _____

Signature _____