Candidate data sheet

Università di Milano Bicocca

Università di Milano Bicocca

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For official (University) use only

Admissions test for the degree course in Medicine and Surgery

For admission to the examination and assessment of evidence, candidates should complete every section of the form using the following criteria:

1) Please print one letter per box in a clear and readable manner

e.g. | M | A | R | I | O |

2) Leave a space between words

e.g. | D | E | | R | O | S | S | I |

Candidate's Personal Data

Name

| S | E | E | F | O | W | | A | F | L | A | H | | | | | | | | | | | | | | |

Surname

| K | A | S | H | U | R | | | | | | | | | | | | | | | | | | | | K | A |

Date of Birth

| 1 | 2 | / | 0 | 6 | / | 2 | 0 | 0 | 2 |

Birthplace

| T | O | R | O | N | T | O | | C | A | N | A | D | A | | | | | | | | | | |

Do not sign below until you have attached your barcode within the box indicated above.

After you have attached your barcode please read the statement below and sign.

I sign to confirm that I selected the adhesive barcodes now attached to this data sheet and my answer sheet myself, and to confirm that the two adhesive barcodes match, and that the personal information given above was completed by me and is correct.

Signature _____

44079

Cambridge Assessment
Admissions Testing