

## Income statement

Name	
Address in the Netherlands	
V-number	
Start and end date period of stay in the Netherlands	
☐ I herewith declare that	I receive a scholarship/fellowship/allowance:
Name provider	
Amount net/gross per month in euro`s	
The total grant is valid	from: until:
☐ Please add a copy of your s	
Only if you fully or	partially finance your stay yourself:
requirement for my resider	ve sufficient private savings to meet the minimum income nce permit. Gross income of € 1.565 per month times the equested period of residence in the Netherlands.
☐ In addition, I declare that I withdrawable.	have access to this savings and that they are freely
☐ I will add a copy of my curre	ent bank balance.
Please keep in mind that wo	hen you (partly) finance your stay yourself we need to check ave enough funding for the next year. This check will be ard amount of the IND applicable at that time.
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Doctoral Service Centre - Immigration Email: <a href="mailto:immigration.dsc@wur.nl">immigration.dsc@wur.nl</a>