

From  
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## Determination of Faculty Affiliation for Voting Purposes Form

Your application must be received by the Elections Office, (room VW 305 – Administration Building, Innstrasse 41) by the closing date of the electoral register.

**Matriculation number:**

**Elections in 20**

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Family name(s), given name(s)

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Street and house number

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Postcode

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Town/city

**As my degree programme is administered by several faculties, I hereby declare my intention to exercise my vote for the following faculty:**

- ☐ Faculty of Law
- ☐ Faculty of Business, Economics and Information Systems
- ☐ Faculty of Arts and Humanities
- ☐ Faculty of Computer Science and Mathematics
- ☐ I am not affiliated with any faculty

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Town/city

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Date

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Signature