Wissenschaftsunterstützende Dienste

- Wahlamt -

Universität Passau • 94030 Passau



From Phone

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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.

Elections in 20

Family name(s), given name(s), academic title		
Street and house number		
Postcode	Town/city	
I am eligible to vote as:	☐ a member of academic or artis	stic staff
	□ other staff member	
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 facul	ty
Town/city	Date	Signature