



Reference number (Ref):

To the Rector of TU Wien
by way of the Service department for Data Protection and Document Management 018

I.
Application for recall of a special power-of-attorney

Title, first name and family name:

Date of birth:

Designation of unit:

Name of unit:

Number of unit:

Faculty/Department of the Rectorate:

The recall of the special power-of-attorney is hereby applied for as of

with immediate effect.

The employee has taken note of this.

Vienna,

Vienna,

Applicant
Title, first name, family name
in block letters

Immediate superior
Title, first name, family name
in block letters

Rectorate Member / Dean
Title, first name, family name
in block letters



Reference number (Ref):

II.

Recall of a special power-of-attorney

The special power-of-attorney of

is hereby recalled

with effect as of

with immediate effect.

Vienna,

o.Univ.Prof.Dipl.-Ing.Dr.techn.Dr.-Ing.h.c.

Sabine Seidler
Rector

cc to:
609-02 Service Unit of Legal Affairs
018 Service department for Data Protection and Document Management - MBL
007-02 Service Unit of Controlling
Applicant
Immediate Superior
Rectorate Member / Dean