

WU Coaching Services Application

WU c	oaching participant (hereinafter	referred to as client)	
Name	, acad. degree:		
Organ	izational unit:		
Email	address:		
Telepl	none no.:		
Coach	:		
Numi client:	per of coaching sessions required	to reach the goals agreed upo	n between coach and
	sessions, n	ninutes each.	
Costs	per session €	net amount	gross amount
Amou	nting to a total of €		
Start	ing date for coaching sessions (r	month/year):	
I ackr	nated ending date (month/year): nowledge that as a coaching client, I noaching session (60 min.). I will for this amount. – The coach will bi	be billed by the WU Personnel	Development and Planning
	My organizational unit will be covering the deductible.		
	I will be paying the deductible my	vself. My billing address is:	
am re Feedb	nowledge that as a condition for equired to provide feedback after ack is a key element of quality cont each and the coaching process as a version of the personnel Design of	r completing the coaching p rol. This report is to focus sole whole. A brief set of guidelines	brocess. ly on my satisfaction with for writing feedback
Date,	client signature		
Date,	coach signature		

Please send this application by in-house mail, fax, or email to Florian Reisky (<u>florian.reisky@wu.ac.at</u>, ext. 5831) or Alexander Mingst (<u>Alexander.Mingst@wu.ac.at</u>, ext. 4350), Personnel Development and Planning Office.

If you have any further questions, please feel free to contact Florian Reisky or Alexander Mingst by phone.