**PERSETUJUAN PELAKSANAAN**

**SEMINAR USULAN PENELITIAN/ UJIAN SKRIPSI**

Menyatakan bahwa mahasiswa tersebut di bawah ini telah disetujui untuk melaksanakan Seminar usulan penelitian / Ujian skripsi\*) :

Nama : ......................................................................................................................

NIM : ......................................................................................................................

Program Studi : ......................................................................................................................

Judul : ......................................................................................................................

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Pada hari/tanggal : ......................................................................................................................

Waktu : ......................................................................................................................

Tempat : ......................................................................................................................

Purwokerto, ........................20.... Purwokerto, ........................20....

Pembimbing I, Pembimbing II,

(..................................................) (..................................................)

NIP. ............................................ NIP. ............................................

**SURAT KETERANGAN KESEDIAAN PEMBIMBING/PENELAAH UNTUK PELAKSANAAN SEMINAR UP / UJIAN SKRIPSI**

Nama : ............................................................................................................

NIM : ............................................................................................................

Program Studi : ............................................................................................................

Judul Skripsi : ............................................................................................................

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Tim Penguji Seminar UP / Ujian Skripsi :

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| --- | --- | --- | --- |
| **No** | **Nama Dosen** | **Tugas** | **Tanggal/****Tanda tangan** |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |

**MATRIKS KESEDIAAN DOSEN PENGUJI**

|  |  |  |  |
| --- | --- | --- | --- |
| No | Nama Dosen | Tugas | Bulan : …………………………………………. |
| Minggu I | Minggu II | Minggu III | Minggu IV | Minggu V |
|   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |
| 1. |  | Pembimbing I |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |
| 2. |   | Pembimbing II |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |
| 3. |   | Penelaah I |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |
| 4. |   | Penelaah II |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |   |   |   |   |  |

Jadwal Pelaksanaan : ...........................................................................

Hari/tanggal : ...........................................................................

Waktu : ...........................................................................

Tempat : ...........................................................................