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| Logo BARU UMB 25% | **PERMOHONAN SEMINAR HASIL PENELITIAN TESIS**  **PROGRAM PASCASARJANA** | | | | | **Q** | |
| No.Dokumen | 121.423.3.007.00 | Distribusi | | | | | |
| Tgl. Efektif | 1 Juni 2008 |  |  |  |  | |  |

Kepada Yth.

Ketua Program Studi Magister Akuntansi

Universitas Mercu Buana

di Jakarta

Perihal : **Permohonan Seminar Hasil Penelitian Tesis**

Dengan hormat,

Sehubungan dengan telah diselesaikannya penyusunan Draft Tesis, maka saya :

N.I.M. : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­\_\_\_

Nama Lengkap : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

No Telp dan Email : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Konsentrasi : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Judul Karya Akhir : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Untuk melengkapi pengajuan Seminar Hasil Penelitian Tesis tersebut dilampirkan persyaratan akademik dan administrasi keuangan sebagai berikut :

|  |  |  |
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| I | **BIRO ADMINISTRASI KEUANGAN** | Pengesahan (\*) |
|  | Bukti Pembayaran Biaya Pendidikan (lunas) s/d Semester III / IV \*) |  |
|  | TELAH MENYELESAIKAN BIAYA TESIS (50% dari Biaya Tesis) |
|  |  | Tanggal : |

|  |  |  |
| --- | --- | --- |
| II | **TATA USAHA** |  |
|  | Copy Surat Tugas Ketua Program Studi tentang Dosen Pembimbing Tesis |  |
|  | Copy Bukti Kegiatan Bimbingan (Buku Bimbingan dibawa)  (min. 12x bimbingan) |
|  | **Lembar Revisi Seminar Proposal Yang Telah Ditandatangani Pembimbing** |
|  | Copy Draft Tesis 2 buah **(JILID SOFTCOVER WARNA BIRU)** |
|  | Daftar Hasil Studi Mahasiswa (DHSM) Kumulatif Semester I s/d III / IV \*) |
|  | Bukti Pendaftaran Ulang (KRS) Semester III / IV \*) |
|  | Kartu Kehadiran Seminar Proposal/Seminar Hasil Penelitian Tesis (minimal 5 kali hadir) | Tanggal : |

(\*) Tanda Tangan, Nama, Tanggal, Stempel

**Persyaratan tidak lengkap/tidak memenuhi syarat pendaftaran akan ”ditolak”**

Demikian permohonan ini, atas perhatian dan persetujuan Bapak/Ibu diucapkan terima kasih.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Diajukan oleh, | Disetujui oleh: | | | Diverifikasi oleh: |
| Mahasiswa | Dosen Pembimbing 1 | Dosen Pembimbing 2 | Ketua/Sekretaris  Program Studi | Staff Administrasi Prodi |
| (tanda tangan & nama) | (tanda tangan & nama) | (tanda tangan & nama) | (tanda tangan & nama) | (tanda tangan dan nama) |
| Tgl: | Tgl: | Tgl: | Tgl: | Tgl: |

catatan : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_