**BUKU KONSULTASI SKRIPSI**

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**NAMA : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**NIM : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PRODI : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**FAKULTAS KEGURUAN DAN ILMU PENDIDIKAN**

**UNIVERSITAS SEBELAS MARET**

**SURAKARTA**

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| **No. Urut** | **Tanggal** | **Bab/Hal/dll**  **(yang dikonsultasikan)** | **Paraf Pembimbing** |
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**DOSEN PEMBIMBING :**

**PEMBIMBING I : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**PEMBIMBING II : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Catatan :**

1. **Setiap konsultasi mintalah tanda tangan Pembimbing**
2. **Bila dalam waktu 4 (empat) minggu berturut-turut tidak berkonsultasi tanpa alasan yang sah, maka konsultasi**

**selanjutnya perlu persetujuan Kepala Program Studi.**

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