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| **BERITA ACARA UJIAN SKRIPSI**Panitia Ujian Skripsi Sarjana Fakultas Ilmu Sosial dan Ilmu Politik Universitas Mulawarman, Program Studi Administrasi Publik telah melaksanakan Ujian Skripsi. Pada hari ini ………. Tanggal, ……………., tempat di Ruang Sidang Fakultas Ilmu Sosial dan Ilmu Politik Universitas Mulawarman, serta pengumuman Ujian Skripsi, bertempat di Ruang Sidang Fakultas Ilmu Sosial dan Ilmu Politik Universitas Mulawarman Samarinda.Mengingat : 1. Buku Pedoman Pendidikan Universitas Mulawarman 2. Surat Keputusan Rektor / Dekan Fakultas Ilmu Sosial dan Ilmu Politik Nomor. 002/1992.Menimbang : Jawaban dan sanggahan yang diberikan pada waktu Ujian Skripsi dengan susunan panitia Ujian sebagai berikut :

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| **No** | **Nama** | **Kedudukan** | **Tanda Tangan** |
| 1. | Dr. Finnah Fourqoniah, M.Si | K e t u a | 1. Ttd
 |
| 2. | Dr. Rina Juwita, S.lP., M.HRIR | Sekretaris | 1. Ttd
 |
| 3. | Nama Pembimbing | Ketua Pelaksanaan | 3. |
| 4. | Nama Penguji I | Anggota |  4. |
| 5. | Nama Penguji II | Anggota | 5. |

**MEMUTUSKAN**Menerangkan bahwa :Nama : ……………………………… NIM : ………………………………..Judul Skripsi :Dengan Nilai : …………………………………………….Dinyatakan : **LULUS / TIDAK LULUS \*)** dengan Predikat : …………………………………Catatan : Samarinda, ………………………………. Panitia Ujian SkripsiKetua, Sekretaris,Ttd TtdDr. Finnah Fourqoniah, M.Si Dr. Rina Juwita, S.lP., M.HRIRNIP. 19800709 200604 2 001 NIP. 19810417 200501 2 001 |

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| **TIM PENYELENGGARA****UJIAN SKRIPSI MAHASISWA**

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**TIM PENYELENGGARA UJIAN**

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| **No** | **Nama Dosen** | **Jabatan** | **Tanda Tangan** |
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| 2. | Nama | Penguji IAnggota | 1. .............................
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| 3. | Nama | Penguji IIAnggota | 1. .............................
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| **REKAPITULASI NILAI HASIL****UJIAN SKRIPSI**

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| Hari : ……………………………………Tanggal : …………………………………..Pukul : 00.00 WitaTempat : Ruang Seminar ………../ Fakultas Ilmu Sosial dan Ilmu Politik Universitas Mulawarman |

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| **PESERTA UJIAN**N a m a : ……………………………………………..NIM : ……………………………………………..Program Studi : Administrasi Publik |

**TIM PENYELENGGARA UJIAN**

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| **No** | **Nama Dosen** | **Jabatan** | **Nilai** | **Komposisi** | **Hasil** | **Ket** |
| **1.** | Nama | PembimbingKetua |  | 60 % |  |  |
| **2.** | Nama | Penguji IAnggota |  | 20 % |  |  |
| **3.** | Nama | Penguji IIAnggota |  | 20 % |  |  |
|  |  |  |
| **Rata - rata Nilai** |

Pelaksana Ujian Skripsi MahasiswaKetua,Nama PembimbingNIP. ……………… |

*Catatan : Form diprint 1 rangkap*

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| **FORMULIR PERTANYAAN DAN NILAI****UJIAN SKRIPSI**

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| **No** | **PERTANYAAN** | **NILAI** |
| ***1.******2.*** | **Penguasaan Materi Skripsi****Penampilan** |  |
|  | **Jumlah Nilai Rata-Rata** |  |

**Pembimbing,**Nama DosenNIP. …………….. |

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| **No** | **PERTANYAAN** | **NILAI** |
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|  | **Jumlah Nilai Rata-Rata** |  |

**Penguji I,**Nama Dosen NIP. …………….. |
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**Penguji II,**Nama DosenNIP. …………….. |

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| FORMULIR SARAN-SARAN PERBAIKANUJIAN SKRIPSI

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Samarinda,…………………….Dosen Pemberi Saran,Nama Dosen Pembimbing NIP. ………………. |

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Samarinda,…………………….Dosen Pemberi Saran,Nama Dosen Penguji I NIP. ………………. |

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Samarinda,…………………….Dosen Pemberi Saran,Nama Dosen Penguji II NIP. ………………. |