**FORM PERSETUJUAN MAGANG**

**DARI DOSEN PEMBIMBING AKADEMIK**

Nama Mahasiswa :

NPM :

Semester :

Tahun Akademik :

Jumlah SKS yang telah diambil (lulus) :

MK yang Diambil selain Magang :

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Periode Magang :

Skema Magang :

Instansi Penerima Magang :

Bagian/Pekerjaan :

|  |  |  |
| --- | --- | --- |
| **Koordinator Program Magang**  Kaprodi Fakultas Psikologi  Universitas Pancasila |  | **Dosen Pembimbing Akademik** |
|  |  |  |
| **(Anindya Dewi Paramita, M.Psi., Psi)** |  | (\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_) |