**PERMOHONAN MENGIKUTI PENDIDIKAN**

**PROGRAM DOKTOR ILMU FARMASI UNIVERSITAS AHMAD DAHLAN**

**TAHUN AKADEMIK 20..../20.....**

Yang bertanda tangan di bawah ini:

Nama lengkap : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(nama dengan gelar akademik, penulisan gelar akademik di belakang nama)

NIP/NIY \*) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pekerjaan : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Instansi : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alamat Instansi : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Mengajukan permohonan agar dapat mengikuti pendidikan Program DOKTOR (S3) ILMU FARMASI pada Fakultas Farmasi Universitas Ahmad Dahlan tahun Akademik 20...../20.....

Rencana judul disertasi : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Promotor yang diusulkan : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Sumber biaya: 1. Bersedia menanggung biaya pendidikan selama belajar di UAD

2. Sponsor akan menanggung biaya pendidikan selama belajar di UAD

(lampirkan dokumen) \*)

...................................................

Pemohon,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*) Jika ada

**DATA RIWAYAT HIDUP**

1. **DATA PRIBADI**
2. Nama lengkap : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(penulisan nama dengan gelar akademik, penulisan gelar akademik di belakang nama)

1. NIP/NIY \*) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. KARPEG \*) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Pekerjaan/Jabatan : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
4. Instansi \*) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Pangkat dan golongan ruang\*) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
6. Tanggal Lahir : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
7. Tempat Lahir : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Jenis Kelamin : Laki-laki/Perempuan \*\*)
9. Agama : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
10. Status Perkawinan : Belum kawin/kawin/janda/duda \*\*)
11. Alamat Kantor : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Kode Pos : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telepon : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faks : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Alamat Domisili : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Telepon/HP : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Faks : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **PENDIDIKAN**
2. **Pendidikan di dalam dan/atau di luar negeri**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Jenjang Pendidikan** | **Nama PT** | **Program Studi** | **Tahun Masuk** | **Tahun Lulus** | **IPK** | **Judul Tugas Akhir** | **Nama Pembimbing** |
| S-1 |  |  |  |  |  |  |  |
| S-2 |  |  |  |  |  |  |  |
| **...** |  |  |  |  |  |  |  |

1. **Kursus/Pelatihan di dalam dan di luar negeri yang relevan**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Nama Kursus/Pelatihan** | **Penyelenggara** | **Waktu dan Durasi** | **Tempat** | **Keterangan** |
| ... |  |  |  |  |
| ... |  |  |  |  |
| ... |  |  |  |  |

1. **Penguasaan Bahasa Asing**

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| --- | --- | --- | --- |
| **Bahasa** | **Skor** | **Lembaga** | **Lampiran Sertifikat (ada/tidak)** |
| Inggris (wajib) |  |  |  |
| ... |  |  |  |
| ... |  |  |  |

1. **KEGIATAN ILMIAH**
2. Simposium/Seminar/Pertemuan ilmiah lain dalam lima (5) tahun terakhir

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Nama Kegiatan** | **Penyelenggara** | **Waktu** | **Kedudukan** | **Keterangan** |
|  |  |  |  |  |
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|  |  |  |  |  |

1. Daftar publikasi karya ilmiah pada jurnal, prosiding ilmiah. Tuliskan sesuai urutan abjad (APA *style*). Lengkapi dengan tautan *website* artikel tersebut.

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1. **TUJUAN MENGIKUTI PROGRAM**

Jelaskan secara singkat maksud Saudara mengikuti Program Doktor UAD?

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1. **PENGALAMAN PEKERJAAN**

Tuliskan pengalaman kerja Saudara dan kedudukan Saudara dalam pekerjaan tersebut.

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1. **PRESTASI DAN PENGHARGAAN**

Tuliskan prestasi dan penghargaan yang pernah Saudara terima. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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