PENGESAHAN PROPOSAL PKM-KEWIRAUSAHAAN

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Judul Kegiatan | : | ........................................................................ |
| 2. | Bidang Kegiatan | : | PKM-K |
| 3 | Ketua Pelaksana Kegiatan |  |  |
|  | 1. Nama lengkap
2. NIM
3. Jurusan
4. Universitas/Fakultas
5. Alamat Rumah dan No Tel./HP
6. Email
 | :::::: | ..................................................................................................................................................................................................................................................................................................................................................................................................................................................... |
| 4 | Anggota Pelaksana Kegiatan/Penulis | : | ................ Orang  |
| 5. | Dosen Pendamping |  |  |
|  | 1. Nama Lengkap dan Gelar
2. NIDN
3. Alamat Rumah dan No Tel. /HP
 | ::: | ........................................................................................................................................................................................................................... |
| 6. | Biaya Kegiatan Total |  |  |
|  | 1. Fakultas Teknik
2. Sumber lain (sebutkan.....)
 | :: | Rp......................Rp...................... |
| 7 | Jangka Waktu Pelaksana | : | ............ Bulan |

Magelang, tanggal-bulan-tahun

|  |  |
| --- | --- |
| MenyetujuiKetua Jurusan ....................(......................................................)NIP/NIK. | Ketua Pelaksana Kegiatan,(.................................................)NIM. |
|  |  |
| Wakil Dekan Bidang Akademik dan Kemahasiswaan(Trisma Jaya Saputra, S.T., M.T.) NIK. 197109102001045C102 | Dosen Pendamping(..................................................)NIP/NIK |

PENGESAHAN PROPOSAL PKM-PENELITIAN

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Judul Kegiatan | : | ........................................................................ |
| 2. | Bidang Kegiatan | : | PKM-P |
| 3 | Ketua Pelaksana Kegiatan |  |  |
|  | 1. Nama lengkap
2. NIM
3. Jurusan
4. Universitas/Fakultas
5. Alamat Rumah dan No Tel./HP
6. Email
 | :::::: | ..................................................................................................................................................................................................................................................................................................................................................................................................................................................... |
| 4 | Anggota Pelaksana Kegiatan/Penulis | : | ................ Orang  |
| 5. | Dosen Pendamping |  |  |
|  | 1. Nama Lengkap dan Gelar
2. NIDN
3. Alamat Rumah dan No Tel. /HP
 | ::: | ........................................................................................................................................................................................................................... |
| 6. | Biaya Kegiatan Total |  |  |
|  | 1. Fakultas Teknik
2. Sumber lain (sebutkan.....)
 | :: | Rp......................Rp...................... |
| 7 | Jangka Waktu Pelaksana | : | ............ Bulan |

Magelang, tanggal-bulan-tahun

|  |  |
| --- | --- |
| MenyetujuiKetua Jurusan ....................(......................................................)NIP/NIK. | Ketua Pelaksana Kegiatan,(.................................................)NIM. |
|  |  |
| Wakil Dekan Bidang Akademik dan Kemahasiswaan(Trisma Jaya Saputra, S.T., M.T.) NIK. 197109102001045C102 | Dosen Pendamping(..................................................)NIP/NIK |

PENGESAHAN PROPOSAL PKM-PENERAPAN TEKNOLOGI

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Judul Kegiatan | : | ........................................................................ |
| 2. | Bidang Kegiatan | : | PKM-T |
| 3 | Ketua Pelaksana Kegiatan |  |  |
|  | 1. Nama lengkap
2. NIM
3. Jurusan
4. Universitas/Fakultas
5. Alamat Rumah dan No Tel./HP
6. Email
 | :::::: | ..................................................................................................................................................................................................................................................................................................................................................................................................................................................... |
| 4 | Anggota Pelaksana Kegiatan/Penulis | : | ................ Orang  |
| 5. | Dosen Pendamping |  |  |
|  | 1. Nama Lengkap dan Gelar
2. NIDN
3. Alamat Rumah dan No Tel. /HP
 | ::: | ........................................................................................................................................................................................................................... |
| 6. | Biaya Kegiatan Total |  |  |
|  | 1. Fakultas Teknik
2. Sumber lain (sebutkan.....)
 | :: | Rp......................Rp...................... |
| 7 | Jangka Waktu Pelaksana | : | ............ Bulan |

Magelang, tanggal-bulan-tahun

|  |  |
| --- | --- |
| MenyetujuiKetua Jurusan ....................(......................................................)NIP/NIK. | Ketua Pelaksana Kegiatan,(.................................................)NIM. |
|  |  |
| Wakil Dekan Bidang Akademik dan Kemahasiswaan(Trisma Jaya Saputra, S.T., M.T.) NIK. 197109102001045C102 | Dosen Pendamping(..................................................)NIP/NIK |

PENGESAHAN PROPOSAL PKM-KARSACIPTA

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Judul Kegiatan | : | ........................................................................ |
| 2. | Bidang Kegiatan | : | PKM-KC |
| 3 | Ketua Pelaksana Kegiatan |  |  |
|  | 1. Nama lengkap
2. NIM
3. Jurusan
4. Universitas/Fakultas
5. Alamat Rumah dan No Tel./HP
6. Email
 | :::::: | ..................................................................................................................................................................................................................................................................................................................................................................................................................................................... |
| 4 | Anggota Pelaksana Kegiatan/Penulis | : | ................ Orang  |
| 5. | Dosen Pendamping |  |  |
|  | 1. Nama Lengkap dan Gelar
2. NIDN
3. Alamat Rumah dan No Tel. /HP
 | ::: | ........................................................................................................................................................................................................................... |
| 6. | Biaya Kegiatan Total |  |  |
|  | 1. Fakultas Teknik
2. Sumber lain (sebutkan.....)
 | :: | Rp......................Rp...................... |
| 7 | Jangka Waktu Pelaksana | : | ............ Bulan |

Magelang, tanggal-bulan-tahun

|  |  |
| --- | --- |
| MenyetujuiKetua Jurusan ....................(......................................................)NIP/NIK. | Ketua Pelaksana Kegiatan,(.................................................)NIM. |
|  |  |
| Wakil Dekan Bidang Akademik dan Kemahasiswaan(Trisma Jaya Saputra, S.T., M.T.) NIK. 197109102001045C102 | Dosen Pendamping(..................................................)NIP/NIK |

PENGESAHAN PROPOSAL PKM-PENGABDIAN KEPADA MSYARAKAT

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | Judul Kegiatan | : | ........................................................................ |
| 2. | Bidang Kegiatan | : | PKM-M |
| 3 | Ketua Pelaksana Kegiatan |  |  |
|  | 1. Nama lengkap
2. NIM
3. Jurusan
4. Universitas/Fakultas
5. Alamat Rumah dan No Tel./HP
6. Email
 | :::::: | ..................................................................................................................................................................................................................................................................................................................................................................................................................................................... |
| 4 | Anggota Pelaksana Kegiatan/Penulis | : | ................ Orang  |
| 5. | Dosen Pendamping |  |  |
|  | 1. Nama Lengkap dan Gelar
2. NIDN
3. Alamat Rumah dan No Tel. /HP
 | ::: | ........................................................................................................................................................................................................................... |
| 6. | Biaya Kegiatan Total |  |  |
|  | 1. Fakultas Teknik
2. Sumber lain (sebutkan.....)
 | :: | Rp......................Rp...................... |
| 7 | Jangka Waktu Pelaksana | : | ............ Bulan |

Magelang, tanggal-bulan-tahun

|  |  |
| --- | --- |
| MenyetujuiKetua Jurusan ....................(......................................................)NIP/NIK. | Ketua Pelaksana Kegiatan,(.................................................)NIM. |
|  |  |
| Wakil Dekan Bidang Akademik dan Kemahasiswaan(Trisma Jaya Saputra, S.T., M.T.) NIK. 197109102001045C102 | Dosen Pendamping(..................................................)NIP/NIK |