

Yayasan Pendidikan Harapan Bersama

**PoliTekniK Harapan Bersama**

**PROGRAM STUDI DIII TEKNIK MESIN**

Kampus II Jl. Dewi Sartika No. 71 Tegal 52117 Telp. 0283-350567

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**KARTU REMIDIAL**

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| Nama Mahasiswa | : ............................................................ | Kelas/Semester | : ....................................................... |
| NIM Mahassiwa | : ............................................................ | Tahun Akademik | : ....................................................... |

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| No | Hari / Tanggal | Mata Kuliah | SKS | Paraf Dosen Pengampu | |
| Nama | TTD |
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| **Jumlah SKS** | | |  |  |  |

Pengesahan,

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| Bagian Keuangan | Admin Prodi |
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Catatan :

Harap cetak rangkap 2 (menggunakan kertas Cover warna hijau muda) sebagai arsip Prodi dan mahasiswa.