No. : /UN1FFA2/MFK/TR/2020

Lamp. : 1 buah Naskah Tesis

Hal : **Undangan Menguji Seminar Tesis**

Kepada Yth.

|  |  |  |
| --- | --- | --- |
| 1. |  | sebagai Ketua |
| 2. |  | sebagai Anggota |
| 3. | *(nama pembimbing utama)* | sebagai Anggota |
| 4. | *(nama pembimbing pendamping)* | sebagai Anggota |

Tim Penguji Tesis

Di tempat

Dengan hormat,

Sehubungan dengan penyelenggaraan Ujian Terbuka/Seminar Tesis Program Magister Farmasi Klinik Fakultas Farmasi UGM, kami mohon kesediaan Bapak/Ibu untuk menjadi penguji tesis bagi mahasiswa yang tersebut dibawah ini :

|  |  |  |
| --- | --- | --- |
| Nama | : |  |
| NIM | : |  |
| Prodi | : |  |
| Judul tesis | : |  |

Dibawah bimbingan :

|  |  |  |
| --- | --- | --- |
| Pembimbing Utama  | : |  |
| Pembimbing Pendamping  | : |  |

Ujian Terbuka/Seminar Tesis akan diselenggarakan pada :

|  |  |  |
| --- | --- | --- |
| Hari / tanggal | : |  |
| Jam | : |  |
| Tempat  | : |  |

Atas kesediaan dan kerjasamanya kami ucapkan terima kasih.

Ketua Prodi Magister Farmasi Klinik

Prof. Dr. Zullies Ikawati, Apt

NIP. 196812061993032001

NB: Mohon hadir berdasi

No. : /UN1FFA2/MFK/TR/2020

Enclosure. : 1 copy of Thesis Proposal

Subject : **Invitation to be the Thesis Seminar Examiner**

To:

|  |  |  |
| --- | --- | --- |
| 1. |  | As a Chair |
| 2. |  | as a Member |
| 3. | *(name of the main advisor)* | as a Member |
| 4. | *(name of the supporting advisor)* | as a Member |

Thesis Examiners

Dear Sir/Madam,

Concerning to the Open Session Thesis Defense/Thesis Seminar for Master Program in Clinical Pharmacy of Faculty of Pharmacy UGM, hereby we invite you to be the examiners for the student below:

|  |  |  |
| --- | --- | --- |
| Name | : |  |
| Student’s Number | : |  |
| Study Program | : |  |
| Title of Proposal | : |  |

Under the guidance of :

|  |  |  |
| --- | --- | --- |
| First Advisor  | : |  |
| Second Advisor  | : |  |

The open session thesis defense/thesis seminar will be held on :

|  |  |  |
| --- | --- | --- |
| Day / date | : |  |
| Time | : |  |
| Place  | : |  |

Thank you for your willingness and cooperation..

Head of Master Program in Clinical Pharmacy

Prof. Dr. Zullies Ikawati, Apt

NIP. 196812061993032001

PS: Please wear a tie