**FORMULIR PENDAFTARAN**

Angkatan: \_\_\_\_\_\_\_ Tahun: \_\_\_\_\_\_\_\_

Nama Lengkap : 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

Biaya Pendidikan : 🖵 1. Biaya Sendiri 🖵 2. Beasiswa Negara 🖵 3. Beasiswa Swasta

Pemberi Beasiswa: 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵 (diisi jika isian biaya pendidikan, anda isi “2” atau “3”)

Tempat Lahir : 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

Tanggal Lahir : 🖵🖵-🖵🖵-🖵🖵 (Tgl/Bln/Thn)

Jenis Kelamin : 🖵 1. Pria 🖵 2. Wanita

Agama : 🖵 1. Islam 🖵 2. Katolik 🖵 3. Kristen 🖵 4. Budha

🖵 5. Hindu 🖵 6. Lainnya, sebutkan: ……….

Status Perkawinan: 🖵 1. Kawin 🖵 2. Tidak kawin 🖵 3. Pernah kawin

Alamat Korespondensi : 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

Kode Pos : 🖵🖵🖵🖵🖵 Tel:🖵🖵🖵🖵🖵🖵🖵 Fax:🖵🖵🖵🖵🖵🖵🖵

Alamat Rumah : 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

Kode Pos : 🖵🖵🖵🖵🖵 Tel:🖵🖵🖵🖵🖵🖵🖵 Fax:🖵🖵🖵🖵🖵🖵🖵

HP: 🖵🖵🖵🖵🖵 🖵🖵🖵🖵🖵🖵🖵

Asal Perguruan Tinggi : 🖵 1. PTN 🖵 2. PTS 🖵 3. Luar negeri

Nama Perguruan Tinggi: 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

Kota – Negara : 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

Tahun Masuk : 🖵🖵🖵🖵 Selesai : 🖵🖵🖵🖵

Bidang Studi S-1 : 🖵 1. Teknik Sipil 🖵 2. Teknik Arsitektur 🖵 7. Lainnya, sebutkan: …

🖵 3. Teknik Mesin 🖵 4. Teknik Elektro

🖵 5. Teknik Planologi 🖵 6.Teknik Industri

Pekerjaan : 🖵 1. Tidak Tetap 🖵 2. PN Departemen

🖵 3. PN BUMN/BUMD🖵 4. Pegawai Swasta 🖵 5. Lainnya, sebutkan: ……….

Untuk isian-isian di bawah ini, harap diisi jika anda telah bekerja

Nama Perusahaan : 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

🖵 1. Kontraktor 🖵 3. Staf Pengajar

🖵 2. Konsultan 🖵 4. Lainnya, sebutkan ……….

Alamat : 🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

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🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵🖵

Kode Pos : 🖵🖵🖵🖵🖵Tel:🖵🖵🖵🖵🖵🖵🖵Fax:🖵🖵🖵🖵🖵🖵🖵

Level Jabatan : 🖵 1. Non Manager 🖵 2. Manager Puncak

🖵 2. Manager Operasional 🖵 4. Lainnya, sebutkan............

🖵 5. Manager Menengah

**DAFTAR KARYA TULIS**

|  |  |  |
| --- | --- | --- |
| JENIS KARYA TULIS | BULAN/TAHUN | JUDUL |
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**KEMAMPUAN BERBAHASA ASING**

|  |  |  |  |
| --- | --- | --- | --- |
| BAHASA | MAMPU BERBAHASA TERTULIS \*) | MAMPU BERBAHASA LISAN \*) | MAMPU BERBAHASA KARYA \*) |
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|  |  |  |  |
|  |  |  |  |

Keterangan: \*) diisi dengan salah satu pilihan: sangat baik, baik, cukup, atau kurang baik

**KEGIATAN DALAM MASYARAKAT**

Jabatan dalam Organisasi Masyarakat / Profesi

Demikianlah saya sampaikan data dan informasi yang sebenarnya, bila data yang saya sampaikan tidak benar, maka saya bersedia diberikan sanksi akademik.

Jakarta, …………………………….. 20 ………

Yang Membuat,

(……………………………………………….)

Nama Jelas

**ALASAN MENGIKUTI PROGRAM**

Harap dijelaskan alasan anda mengikuti Program Pascasarjana ini

(dengan menggunakan < 300 kata)

**DAFTAR RIWAYAT HIDUP**

**I. KETERANGAN PERORANGAN**

|  |
| --- |
| 1. Nama Lengkap : |
| 2. Tempat tanggal lahir : |
| 3. Alamat rumah : |
|  |
|  |
|  |
| No Telpon : Fax: e-mail: |
| 4. Kegemaran (hobby) : |

**II. RIWAYAT PENDIDIKAN**

1. Pendidikan di dalam negeri

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| NO | TINGKAT | NAMA PENDIDIKAN | JURUSAN | STTB / IJASAH TH | TEMPAT |
| **1** | **2** | **3** | **4** | **5** | **6** |
| 1 | SLTA |  |  |  |  |
| 2 | Perguruan Tinggi |  |  |  |  |
| 3 | Pascasarjana |  |  |  |  |

2. Kursus / Latihan di dalam dan di luar negeri

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| NO | NAMA KURSUS/LATIHAN | LAMANYA (TGL/BLN/THN) s/d (TGL/BLN/THN) | TEMPAT | KETERANGAN |
| **1** | **2** | **3** | **4** | **5** |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
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**III. RIWAYAT PEKERJAAN**

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| --- | --- | --- | --- |
| NO | TEMPAT BEKERJA | TAHUN MULAI DAN SAMPAI | JABATAN |
| **1** | **2** | **3** | **4** |
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**IV. TANDA JASA / PENGHARGAAN**

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| --- | --- | --- | --- |
| NO | JENIS PENGHARGAAN | TAHUN PEROLEHAN | NAMA NEGARA / INSTANSI YANG MEMBERI |
| **1** | **2** | **3** | **4** |
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**V. PENGALAMAN MENGIKUTI (PANITIA) SIMPOSIUM / SEMINAR**

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| --- | --- | --- | --- | --- | --- |
| NO | NAMA SIMPOSIUM / SEMINAR | KEDUDUKAN / PERANAN | BULAN/TAHUN PENYELENGGARA | INSTANSI PENYELENGGARA | TEMPAT |
| **1** | **2** | **3** | **4** | **5** | **6** |
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Jakarta, ………………………………………..

Yang membuat,

(………………………………….)

**RAHASIA**

**SURAT REKOMENDASI**

Surat Rekomendasi ini diperlukan untuk pendaftaran Program Studi Magister Teknik Sipil Universitas Tarumanagara

Calon Pendaftar

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

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

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Tanda Tangan : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pemberian Rekomendasi

Kami sangat menghargai kesediaan Saudara untuk memberikan evaluasi terhadap calon pendaftar Program Pascasarjana Magister Teknik Sipil Universitas Tarumanagara

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

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

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Tanda Tangan : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Surat rekomendasi ini mohon dikirim langsung oleh Pemberi Rekomendasi dalam amplop tertutup, kepada:

Ketua Program Magister Teknik Sipil

Universitas Tarumanagara

Gedung Utama, Lantai 14

Jl. Letjen S. Parman No. 1 – Jakarta 11440

**RAHASIA**

1. Berapa lama Saudara mengenal calon dan dalam hubungan apa?

2. Unsur-unsur kemampuan/ kekuatan utama calon adalah:

3. Kelemahan/ kekurangan calon adalah:

4. Mohon diberikan contoh situasi / kejadian yang menunjukkan tingkat inisiatif, motivasi kematangan berpikir atau ciri-ciri lain, yang mencerminkan tingkat kemampuan calon untuk mengikuti Program Studi Tingkat Lanjut.

5. Hal-hal yang mungkin dapat mengganggu usaha belajar calon dalam rangka penyelesaian Program Pascasarjana

6. Penilaian Saudara mengenai calon \*)

a. Kemampuan Intelektual : 🖵

b. Ketekunan belajar / bekerja : 🖵

c. Kemampuan mengatur penggunaan waktu : 🖵

\*) Pilihan isian: 1. Tidak dapat menilai

2. Kurang

3. Rata-rata

4. Baik

5. Baik sekali

6. Luar biasa

Tanda tangan Pemberi Rekomendasi : ……………………………………………………………………………..

Tanggal : …………………………………….

**RAHASIA**

**SURAT REKOMENDASI**

Surat Rekomendasi ini diperlukan untuk pendaftaran Program Studi Magister Teknik Sipil Universitas Tarumanagara

Calon Pendaftar

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

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

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Tanda Tangan : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Pemberian Rekomendasi

Kami sangat menghargai kesediaan Saudara untuk memberikan evaluasi terhadap calon pendaftar Program Pascasarjana Magister Teknik Sipil Universitas Tarumanagara

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

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

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Tanda Tangan : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Surat rekomendasi ini mohon dikirim langsung oleh Pemberi Rekomendasi dalam amplop tertutup, kepada:

Ketua Program Magister Teknik Sipil

Universitas Tarumanagara

Gedung Utama, Lantai 14

Jl. Letjen S. Parman No. 1 – Jakarta 11440

**RAHASIA**

1. Berapa lama Saudara mengenal calon dan dalam hubungan apa?

2. Unsur-unsur kemampuan/ kekuatan utama calon adalah:

3. Kelemahan/ kekurangan calon adalah:

4. Mohon diberikan contoh situasi / kejadian yang menunjukkan tingkat inisiatif, motivasi kematangan berpikir atau ciri-ciri lain, yang mencerminkan tingkat kemampuan calon untuk mengikuti Program Studi Tingkat Lanjut.

5. Hal-hal yang mungkin dapat mengganggu usaha belajar calon dalam rangka penyelesaian Program Pascasarjana

6. Penilaian Saudara mengenai calon \*)

a. Kemampuan Intelektual : 🖵

b. Ketekunan belajar / bekerja : 🖵

c. Kemampuan mengatur penggunaan waktu : 🖵

\*) Pilihan isian: 1. Tidak dapat menilai

2. Kurang

3. Rata-rata

4. Baik

5. Baik sekali

6. Luar biasa

Tanda tangan Pemberi Rekomendasi : ……………………………………………………………………………..

Tanggal : …………………………………….

**BUKTI PENDAFTARAN**

Nama Lengkap :

Alamat :

Persyaratan : a. Formulir Pendaftaran 🖵

b. Legalisir Ijasah S1/transkript 🖵

c. Pasphoto berwarna (terbaru) ukuran 2x3 & 3x4 @ 2 (dua) buah 🖵

d. SKBRI / Akte Kelahiran 🖵

e. Nilai TOEFL/GRE 🖵

f. Surat Rekomendasi 🖵

g. Curicullum Vitae 🖵

h. Fotokopi KTP Jabotabek / Ket. Domisili 🖵

i. Biaya USM 🖵

Ket: 🗹 = ada Jakarta, ……………………….20…..

⌧ = tidak ada

Cat: Bukti Pendaftaran ini harap (………………………………………)

dibawa saat pendaftaran ulang saat USM Nama Jelas

…………………………………………………………………………………………………………...............................



**BUKTI PENDAFTARAN**

Nama Lengkap :

Alamat :

Persyaratan : a. Formulir Pendaftaran 🖵

b. Legalisir Ijasah S1/transkript 🖵

c. Pasphoto berwarna (terbaru) ukuran 2x3 & 3x4 @ 2 (dua) buah 🖵

d. SKBRI / Akte Kelahiran 🖵

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i. Biaya USM 🖵

Ket: 🗹 = ada Jakarta, ……………………….20…..

⌧ = tidak ada

Cat: Bukti Pendaftaran ini harap (………………………………………)

dibawa saat pendaftaran ulang saat USM Nama Jelas