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| NAMA MATA KULIAH | | | | : | | JAM | | : | |
| KELAS | | | | : | | BULAN | | : | |
| NOMOR DOSEN | | | | : | | UJIAN | |  | |
| NAMA DOSEN | | | | : | | MID TEST | | : | |
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| NO | NO. POKOK | NAMA MAHASISWA | | Bayar sks | | Paraf | | Nilai |
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| Di datakan oleh : | Mengetahui | Penanggung Jawab | Jumlah : | Tanggal Cetak |
|  |  |  | Hadir :  Izin :  Absen : |  |