



**UNIVERSITAS GADJAH MADA
FACULTY OF LAW
INTERNATIONAL UNDERGRADUATE PROGRAM (S1-IUP)**

Elective Course Registration Form

Serial Number: 08/II/IUPL.UGM/LECT/2016

Having registered in concentration of in Semester of Academic Year/..... and completed the following Elective Course(s):

Course Name	Semester/Academic Year in which the Course was taken	Final Grade
1./20.....- 20.....	
2./20.....- 20.....	
3./20.....- 20.....	
4./20.....- 20.....	
5./20.....- 20.....	
6./20.....- 20.....	

I, the undersigned,

Name :

Student Number :

hereby register for enrollment into the following Elective Course(s):

Course Name	Course Code
1.	
2.	
3.	
4.	
5.	

For your consideration, I hereby attach to this Form my *Academic Transcript*.

Date : Signature :

(for verification use only)

VERIFIED | **REJECTED**

Assistant-Head of the Undergraduate Program

Rangga Aditya Dachlan, S.H., LL.M.