

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

Study Plan Request Form

with regards to my study for Semester of Academic Year /	, I, the unde	rsignea,	
Name :			
Student Number :			
hereby propose a Study Plan, as follows:			
Course Name		Class	Credit
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
	TOTAL (CREDITS	
For your consideration, I am attaching to this Form: a) A copy of my student copy of my Academic Transcript of the previous semester, if applicable.	t identification ca	ard (KTM)	; b) a
	Date: Student's Name & Signature:		
VERIFIED REJECTED Head of the Undergraduate Program			
Dr. Wahyu Yun Santoso, S.H., M.Hum., LL.M.			
Suggested change, in case of rejection:			