

**PROGRAM MAGANG MAHASISWA**

**FAKULTAS EKONOMI DAN BISNIS (FEB)**

**UNIVERSITAS MUHAMMADIYAH SUMATERA UTARA**

**(UMSU)**

**Jl. Kapten Mukhtar Basri No. 3 Tel. (061) 6624567 Medan 20238**



**AGENDA HARIAN MAGANG**

**Nama** : …………………………………………………………….…

**NPM** : ……………………………………….………………………

**Program Studi** : **Akuntansi / Manajemen**

**Konsentrasi** : …………………………………………………….…………

**Tempat Magang** : ……………………………………………………….………

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| **No.** | **Hari / Tanggal** | **Uraian Pekerjaan** | **Paraf Instruktur** |
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**Medan**,…………………………**20**…

**Kepala Kantor/Instansi/Perusahaan**

**(………………………………………)**



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**DAFTAR HADIR**

**Nama** : …………………………………………………………….…

**NPM** : ……………………………………….………………………

**Program Studi** : **Akuntansi / Manajemen**

**Konsentrasi** : …………………………………………………….…………

**Tempat Magang** : ……………………………………………………….………

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| **No.** | **Hari /Tanggal** | **Pagi** | | **Siang** | | **Keterangan** |
| **Masuk** | **Keluar** | **Masuk** | **Keluar** |
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**Medan**,…………………………**20**…

**Kepala Kantor/Instansi/Perusahaan**

**(………………………………………)**