|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Kluster KKN**  | **KKN** **Nusantara**  | **KKN****Reguler/Multisekotral**  | **KKN** **Tangguh Bencana** | **KKN** **Brantas Tuntas** |
|  |  |  |  |

*\*Beri tanda V untuk pilihan KKN*

**FORMULIR PENDAFTARAN PESERTA KKN TAHUN 2020**

A. IDENTITAS DIRI

Nama Lengkap : ...............................................................................................................

NIM : ...............................................................................................................

Tempat Tgl Lahir : ...............................................................................................................

Jenis Kelamin : 1. Laki-laki, 2. Perempuan (Coret yang tidak perlu)

Alamat Rumah : ...............................................................................................................

: ...............................................................................................................

No Telp/Hp : ...............................................................................................................

Alamat E-mail : ...............................................................................................................

Fakultas : ...............................................................................................................

Jurusan : ...............................................................................................................

Semester : ...............................................................................................................

IPK Terakhir : ...............................................................................................................

Bidang Keahlian : 1. ....................................................

 2. ....................................................

 3. ....................................................

Pengalaman Organisasi:

1. ..........................................................................................................

2. ..........................................................................................................

3. ..........................................................................................................

B. IDENTITAS WALI MAHASISWA

Nama Ayah : ...............................................................................................................

Nama Ibu : ...............................................................................................................

Alamat : ...............................................................................................................

: ...............................................................................................................

No Telp : ...............................................................................................................

Pekerjaan Ayah : ...............................................................................................................

Pekerjaan Ibu : ...............................................................................................................

Tulungagung,…. Desember 2019

Foto 4x6 Peserta

 Peserta,

(\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)