Subject: Petition

*(Perihal: Permohonan)*

**CERTIFICATE OF GRADUATION**

*(SURAT KETERANGAN LULUS)*

Dear, Dean

*(Yth. Dekan)*

Faculty of Public Health

*(Fakultas Kesehatan Masyarakat)*

Universitas Airlangga

Surabaya

The undersigned below : ………………………………………………………….

*(Yang bertanda tangan di bawah ini)*

Name : ………………………………………………………….

*(Nama)*

Student ID Number : ………………………………………………………….

*(NIM)*

Study Program : ………………..… Bachelor*(S1)*/Master*(S2)*/Doctoral*(S3)*

*(Program Studi)*

Specialization : …………………………………….………… (Master)

*(Minat Studi)*

Judicial Date : ………………………………………………………….

*(Tanggal Yudisium)*

Apply for a certificate of graduation, for the purposes of *(Mengajukan permohonan surat keterangan lulus, untuk keperluan)*:

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………

Thus our request, thank you for your attention.

*(Demikian pennohonan kami, atas perhatiannya kami sampaikan terima kasih)*

Surabaya, ……………………………...

Applicant,

*(Pemohon)*

…………………………………………

Student ID Number *(NIM)*