 **YAYASAN MIFTAHUL MUBTADIIN AS SHOLIHIN**

Akte Notaris : Abdur Rahman, SH, M.Kn

**MTs. BAHRUS SHOLIHIN**

**BANDUNG – KONANG - BANGKALAN**

Sekretariat : JL. KH. Moh. Sholeh bin KH. Moh. Sarim Krasaan Bandung Konang Bangkalan 69175 HP. 085331773004

**FORMULIR PENENERIMAAN PESERTADIDIK BARU**

**MTs. BAHRUS SHOLIHIN**

**TAHUN AJARAN 2017 / 2018**

1. Nomor Pendaftaran :…………………………………..
2. Nama lengkap calon siswa :......................................................
3. Jenis kelamin :......................................................
4. Tempat dan tanggal lahir :......................................................
5. Agama :......................................................
6. Alamat rumah / Nomor HP :......................................................
7. Asal sekolah/Madrasah :......................................................
8. NISN :......................................................
9. No. Peserta Ujian Nasional :......................................................
10. Jumlah Nilai US / UN :......................................................

(BI, MTK, IPA)

1. Nama orang tua :......................................................
2. Alamat orang tua / No. HP :......................................................
3. Nama wali :......................................................
4. Alamat wali / No. HP :......................................................

Konang ………………

Orang tua / Wali Calon Peserta Didik

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