KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)

Student's	Full	Address	
Student's	Full	Address	

Sibratare:	Date:
5698	
DERMA BRONG AHAFO AK-002-	
DERMA	
P.O.BOX -DERMA	

SECTION B" TO BE COMPLETED BY PARENT/GUARDIAN

I have read the rules, regulations and conditions regarding my ward's admission and I agree that he/she should be enrolled at Kumasi Technical Institute on the basis of what I have read.

Name: ASANTE BERNARD

Address: P.O.BOX 4 DERMA DERMA BRONG AHAFO AK-002-2569 Ghana

Telephone/Mobile No: 0542664733

Email:

Signature:.....

Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.