KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

Student's Full Address

P.O.BOX 179

EJIUS ASHANTI AE-0049-9959

Ghana

Signature:

Date:

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: OWUSU AKYAR SARPONG

Address: P.O.BOX 179 EJIUS ASHANTI AE-0049-9959 Ghana

Telephone/Mobile No: 0549193877

Email:

Signature:.....

Date:

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