KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I TWENEBOAH KODUA LISTOWEL accept the conditions of admission to

Student's Full Address

ABUAKWA SEPAASE

P.O.BOX 292, ADUM KUMASI

KUMASI ASHANTI REGION AH-

0558-4675

Sibratare:

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: MR. YAW FRIMPONG

Address: ABUAKWA SEPAASE P.O.BOX 292, ADUM-KUMASI KUMASI ASHANTI REGION AH-0558-4675 Ghana

Telephone/Mobile No: 0243320006

Email:

Signature:.....

Date:

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