

KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I GYAMFI YEHOSEPHAT ASANTE accept the conditions of admission to pursue a course in MOTOR VEHICLE ENGINEERING and promise to abide by the Institute's rules, regulations and any other conditions which may be made from time to time.

Student's Full Address

Michael Adu Gyamfi, c/o St John Of
God Hospital
Box 24, Duayaw Nkwanta, AHAFO
Region

Signature: Duayaw Nkwanta Ahafo B2-0021-..... 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: Michael Adu Gyamfi

Address: c/o St John Of God Hospital Box 24, Duayaw
Nkwanta, AHAFO Region
Duayaw Nkwanta Ahafo B2-0021-3582
Ghana

Telephone/Mobile No: 0243481829

Email: michaeladugyamfi777@gmail.com

Signature:..... **Date:**

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