

KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I DAUDA SALIFU accept the conditions of admission to
pursue a course in AGRICULTURAL MECHANIZATION 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

P.O.BOX 144
BIBIANI WESTERN WB-0018-0611
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: SALIFA AWUNI

Address: P. O. BOX 144 BIBIANI
BIBIANI ASHANTI WB-00180611
Ghana

Telephone/Mobile No: 0249243229

Email:

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

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