KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS) to abide by the Institute's rules, regulations and any other conditions which may be made from time to time. **Student's Full Address BOX 11349 AKWATIALINE AKWATIALINE ASHANTI AK-012-**4098 Sibratore: 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. ABDULLAH ABDUL SAMED Name: Address: **BOX 11349 AKWATIALINE AKWATIALINE ASHANTI AK-012-4098** Ghana Telephone/Mobile No: 0249064327 **Email:**

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

Signature:....