KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION	A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
IABI	DULLAH AYUBA accept the conditions of admission to
	ourse in
Student's	Full Address
P.O. BOX	1985
SEPE BUG	OKROM ASHANTI AK-023-
8150	
Ghana	
Signature	Date:
SECTION	B" TO BE COMPLETED BY PARENT/GUARDIAN
	I the rules, regulations and conditions regarding my ward's admission and I agree that he/she enrolled at Kumasi Technical Institute on the basis of what I have read.
Name:	ABDULLAH GARIBA
Address:	P.O. BOX 1985 KUMASI SEPE BUOKROM ASHANTI AK-023-8150 Ghana
Telephone	e/Mobile No: 0247792475
Email:	
Signature	: Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.