KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

Student's Full Address	
BOX CN 7	
ABOABO-KUMASI	
FIJAI-NYANYANO ASHANTI AS-053-	
9931	
Sibanare:	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: KWAME ABBAN

Address: BOX CN 7 ABOABO-KUMASI FIJAI-NYANYANO ASHANTI AS-053-9931 Ghana

Telephone/Mobile No: 0245831336

Email:

Signature:..... Date

Date:

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