KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

Student's Full Address

Sibanare:	Date:
WG-1338-5665	
SEFWI PABOASE WESTERN NORTH	
BOX 75, SEFWI WIAWSO	
PABOASE M/A JHS POST OFFICE	

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: SALA ABDUL

Address: PABOASE M/A JHS POST OFFICE BOX 75, SEFWI WIAWSO SEFWI PABOASE WESTERN NORTH WG-1338-5665 Ghana

Telephone/Mobile No: 0541027456

Email:

Signature:.....

Date:

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