

KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I ABDUL LATIF accept the conditions of admission to
pursue a course in ARCHITECTURAL DRAFTING 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 1967
SEWUA
SEWUA ASHANTI AT-1130-7421
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: ABUDALA ABUDALA

Address: P. O. BOX 1967 SEWUA
SEWUA ASHANTI AT-1130-7421
Ghana

Telephone/Mobile No: 0244832149

Email:

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

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