## **KUMASI TECHNICAL INSTITUTE (KTI)**

## **ADMISSION ACCEPTANCE FORM**



<b>SECTION</b>	NA: TO BE COMPLETED BY S	TUDENT (IN CAPITALS)
IKUS	SI FAISAL	accept the conditions of admission to
pursue a co	ourse in MOTOR VE	
Student's	Full Address	
P.O.BOX	5121	
ABURAAS	SO ASHANTI AK-012-8888	
Ghana		
Signature	:	Date:
<b>SECTION</b>	N B" TO BE COMPLETED BY I	PARENT/GUARDIAN
	_	ons regarding my ward's admission and I agree that he/she tute on the basis of what I have read.
Name:	ABASS BOAKYE	
Address:	P.O.BOX 5121 ABURAASO ASHANTI AK-012 Ghana	-8888
Telephone	e/Mobile No: 0201365727	
Email:		
Signature	:	Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.