

KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I ACHEAMPONG DERRICK 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 FNT 260, KUMASI
KUMASI ASHANTI AK-067-3421
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: DANIEL ACHEAMPONG

Address: P.O. BOX FNT 260, KUMASI
KUMASI ASHANTI AK-067-3421
Ghana

Telephone/Mobile No: 0240707811

Email:

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

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