KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

Student's Full Address

P.O BOX 6 KUNTANASE	
NKWANTA ASHANTI NK 12	
NKWANTA	
Ghana	

Signature: Date:

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: AKWASI MARTIN

Address: P.O BOX 6 KUNTANASE NKWANTA ASHANTI NK 10 NKWANTA Ghana

Telephone/Mobile No: 0541711943

Email:

Signature:..... I

Date:

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