KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I FRIMPONG EMMANUEL accept the conditions of admission to

Student's Full Address	
BOX AP 10	
AKROPONG-ASHANTI	
AKROPONG ASHANTI AH-0767-	
1107	
Sibanare:	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: ISAAC FRIMPONG

Address: BOX AP 10 AKROPONG-ASHANTI AKROPONG ASHANTI AH-0767-1107 Ghana

Telephone/Mobile No: 0244793888

Email:

Signature:..... Date:

Date:

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