KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION	A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
ISAR	PONG KENNETH accept the conditions of admission to
pursue a co	urse in
Student's 1	Full Address
P. O. BOX	124 OBUASI
OBUASI A	SHANTI AO-80-8624-609
Ghana	
Signature:	Date:
SECTION	B" TO BE COMPLETED BY PARENT/GUARDIAN
	the rules, regulations and conditions regarding my ward's admission and I agree that he/she nrolled at Kumasi Technical Institute on the basis of what I have read.
Name:	SARPONG ISAAC
Address:	P. O. BOX 124 OBUASI OBUASI ASHANTI AO-80-8624-609 Ghana
Telephone	/Mobile No: 0542386218
Email:	
Signature:	Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.