KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I UMAR SHARIF accept the conditions of admission to

Student's Full Address	
C/O CENTRAL MOSQUE P. O. BOX	
AO 65 KUMASI	
KUMASI ASHANTI AT-0238-5040	
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: UMAR RBRAHIM

Address: C/O CENTRAL MOSQUE P. O. BOX AO 65 KUMASI KUMASI ASHANTI AT-0238-5040 Ghana

Telephone/Mobile No: 0243649301

Email:

Signature:..... Da

Date:

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