KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I ADOM GIDEON BOAKYE accept the conditions of admission to

to abide by the Institute's rules, regulations and any other conditions which may be made from time to time.

Student's Full Address

BOX 62 W ADUM

NKORANSA ASHANTI AG/0630695

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.

MR KWAJO BOAKYE Name:

Address: **BOX 62 W KUMASI** NKORANSA ASHANTI AG/06530695 Ghana

Telephone/Mobile No: 0244416144

Email:

Signature:....

Date:

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