KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)	
IPEP	RAH SAMPSON accept the conditions of admission to
pursue a co	urse in
Student's 1	Full Address
P.O.BOX 4	49 DD25
MANSO A	DADEASE ASHANTI
02405353	96
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:	MOHAMMED ABUDULAI ASIEDU
Address:	BOX 49 DD25 MANSO ADADEASE MANSO ADADEASE ASHANTI 0240535396 Ghana
Telephone	Mobile No: 0240240535396
Email:	
Signature: Date:	

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