KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS) IANNING SYNFRED PAPA KWESI 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** P.O. BOX LT 464 ACCRA TEMA GREATER ACCRA A8H 75 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. **ERIC KOJO BOAKYE** Name: Address: P.O. BOX LT 464 ACCRA **TEMA GREATER ACCRA A8H 75** Ghana Telephone/Mobile No: 0242559281

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

Email:

Signature:....