KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

Student's Full Address

| Signature: | Date: |
|-------------------------------|-------|
| Ghana | |
| TREDE ASHANTI AJ-0737-8947 | |
| KJ.MAIN | |
| C/O ALI SIGRINA P.O.BOX 15053 | |

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: ALI SIGRINA

Address: P.O.BOX 15053 KJ.MAIN TREDE ASHANTI AJ-0737-8947 Ghana

Telephone/Mobile No: 0244972608

Email:

Signature:..... Date:

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