KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)	
ITWUMASI ABRAHAM AGYEI accept the conditions of admission to	
pursue a course in	se to
Student's Full Address	
P O BOX 52	
MAMPONG	
MAMPONG ASHANTI AM-0410-	
5400	
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/should be enrolled at Kumasi Technical Institute on the basis of what I have read.	she
Name: MICHAEL TWUMASI	
Address: P O BOX 52 MAMPONG MAMPONG ASHANTI AM-0410-5400 Ghana	
Telephone/Mobile No: 0557137953	
Email:	
Signature: Date:	· ••

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.