## **KUMASI TECHNICAL INSTITUTE (KTI)**

## **ADMISSION ACCEPTANCE FORM**



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

Student's Full Address	
POST OFFICE BOX 7	
JUASO	
ASANTE AKYIM SOUTH ASHANTI	
WM-0021-9946	
Sibratare:	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.

Name: CHRISTOPHER DOI

Address: POST OFFICE BOX 7 JUASO ASANTE AKYIM SOUTH ASHANTI WM-0021-9946 Ghana

Telephone/Mobile No: 0247273668

Email:

Signature:..... Date: .....

Date: .....

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