

KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I **BINIBAWERI DORIS TAKICHOR** accept the conditions of admission to
pursue a course in **FURNITURE DESIGN &** and promise
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 31
NSUTA
ANKAMADOA ASHAANTI AK-234-
1234

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.

Name: SIMON BINIBAWERI

Address: P. O. BOX 31 NSUTA
ANKAMADOA ASHAANTI AK-234-1234
Ghana

Telephone/Mobile No: 054919043

Email:

Signature: **Date:**

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