KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I DAUDA NURUDEEN MOHAMMED accept the conditions of admission to

Student's Full Address

P. O. BOX 17 AGONA SHANTI

KUMASI ASHANTI AK-021-4099

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.

Name: DAIDA FUSEINI

Address: P. O. BOX 17 AGONA ASHANTI KUMASI ASHANTI AK-021-4040 Ghana

Telephone/Mobile No: 0243570934

Email:

Signature:..... E

Date:

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