KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS) I ASAKIA SAMUEL accept the conditions of admission to 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 17 CENTRAL PRISONS **KSA** KUMASI ASHANTI AK-037-3460 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. **ADIT AGANDAA** Name: Address: P. O. BOX 17 CENTRAL PRISONS KSI KUMASI ASHANTI AK-037-3460 Ghana Telephone/Mobile No: 0557786152 **Email:** Signature:....

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.