KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I KATTEY ELIZABETH accept the conditions of admission to

Student's Full Address

Sibanare:	Date:
AY-1186-9753	
MANKRANSO-ABAASUA ASHANTI	
ABAASUA	
P . O . BOX 15 , MANKRANSO-	

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: MR. SAMPSON DOE KATTEY

Address: P.O.BOX 15, MANKRANSO-ABAASUA MANKRANSO-ABAASUA ASHANTI AY-1186-9753 Ghana

Telephone/Mobile No: 0540889246

Email: ferkaemmanuel12@gmail.com

Signature:..... Date:

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