KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
IAFRIYIE DERRICK accept the conditions of admission to
pursue a course in
Student's Full Address
BOX 7
POKUKROM
POKUKROM ASHANTI AY2841-
7946
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: ASAMOAH ERIC
Address: BOX 7 POKUKROM POKUKROM ASHANTI AY-2841-7946 Ghana
Telephone/Mobile No: 0245838429
Email:
Signature: Date:

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