

KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I ABDUL RAHMAN IDIL accept the conditions of admission to
pursue a course in UPHOLSTERY 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 R.Y 422 KUMASI
EJURA ASHANTI 0550740810
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: ABDUL RAHMAN

Address: P.O.BOX R.Y 422 KUMASI
EJURA ASHANTI 0245737375
Ghana

Telephone/Mobile No: 0245737375

Email:

Signature:..... **Date:**

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