KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION	A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
IOBE	ENG DANIEL accept the conditions of admission to
pursue a co	ourse in
Student's	Full Address
BOX 8, Af	NKWASO, W/R
MANHYIA	A WESTERN 0257018986
Ghana	
Signature:	Date:
SECTION	B" TO BE COMPLETED BY PARENT/GUARDIAN
	the rules, regulations and conditions regarding my ward's admission and I agree that he/she enrolled at Kumasi Technical Institute on the basis of what I have read.
Name:	ISAAC OBENG
Address:	MANHYIA W/R BOX 8 MANHYIA W/R WESTERN 0257018986 Ghana
Telephone	/Mobile No: 0257018986
Email:	
Signature:	Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.