KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
ISALIFU ABDUL WAHHAB accept the conditions of admission to
pursue a course in
Student's Full Address
P. O BOX 1375
ASOKWARIMANPONG KUMASI
KUMASI ASHANTI AE-0986-6974
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/sh should be enrolled at Kumasi Technical Institute on the basis of what I have read.
Name: ISHATU MUTALA
Address: P. O. BOX 1375 ASOKWARAMAMPONG KUMASI KUMASI ASHANTI AE-0986-6974 Ghana
Telephone/Mobile No: 0244044841
Email: abdulwahhab@gmail.com
Signature: Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.