KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I ASHIAGBOR CHRISTIAN AKWETEY accept the conditions of admission to

Student's Full Address

P. O. BOX 4041 ACHIMAKWAWUMA

KUMASI ASHANTI AK-020-8985

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: PHILIP ASHIAGBOR

Address: P. O. BOX 4042 ATWIMAKWAMUMA KUMASI ASHANTI AK-020-8985 Ghana

Telephone/Mobile No: 0540560674

Email:

Signature:.....

Date:

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