KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

ABDUL ZAIDAN RAUF

I ABDUL ZAIDAN RAUF
pursue a course in
Student's Full Address
KENYASI ABERIM
BROFOYEDRU
KUMASI ASHANTII AD-244-9299
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: SUWEIBA OSMAN
Address: KENYASI ABERIM BROFOYEDRU KUMASI ASHANTI AD-244-9299 Ghana
Telephone/Mobile No: 055 398 7981
Email: abdulrauffiseini12@gmail.com
Signature: Date:
NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.