KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

Student's Full AddressP.O. BOX 2510ASHT-TOWNKUMASI ASHANTI P.O. BOX 2510GhanaSignature: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: ALAMISI KOLOM

Address: P.O. BOX 2510 ASHT-TOWN KUMASI ASHANTI P.O. BOX 2510 Ghana

Telephone/Mobile No: 0244518884

Email:

Signature:..... Date

Date:

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