KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)	
IODURO WISDOM accept the conditions of admission to	
pursue a course in	
Student's Full Address	
P.O.BOX 46	
SEFWI-BEKWAI	
SEFWI BEKWAI WESTERN NORTH	
WB-2911-5779	
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/s should be enrolled at Kumasi Technical Institute on the basis of what I have read.	he
Name: PETER ODURO	
Address: P.O.BOX 46 SEFWI BEKWAI SEFWI BEKWAI WESTERN NORTH WB-2911-5779 Ghana	
Telephone/Mobile No: 0545430659	
Email:	
Signature: Date:	•

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.