KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
IBAAH RANDY ADU accept the conditions of admission to
pursue a course in
Student's Full Address
P.O BOX KJ 486
BUOKROM ASHANTI P.O BOX KJ
486
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: AKWESI BAAH
Address: P.O BOX KJ 486 BUOKROM ASHANTI P.O BOX KJ 486 Ghana
Telephone/Mobile No: 0557320041
Email:
Signature: Date:

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