KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

IABI	DUL RAHMAN accept the conditions of admission to
pursue a co	ourse in
Student's	Full Address
BOX 269	
NSAWAN	1
NSAWAN	1 EASTERN EG-209-1431
Ghana	
Signature	: Date:
SECTION	B" TO BE COMPLETED BY PARENT/GUARDIAN
	I the rules, regulations and conditions regarding my ward's admission and I agree that he/she enrolled at Kumasi Technical Institute on the basis of what I have read.
Name:	ASMINU KARIM
Address:	BOX 269 NSAWAM NSAWAM EASTERN EG-209-1431 Ghana
Telephone	e/Mobile No: 0556650192
Email:	
Signature	: Date:
	HE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE AL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.