KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

TCHINATCHI KELVIN

IICF	AINAICHI KELVIN accept the conditions of admission to
	ourse in
Student's	Full Address
P. O BOX	KJ5 413
NKUABU	OA ASHANTI P O BOX KJ5
413	
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:	EMMANUEL ATTA TECHINACHI
Address:	P. O BOX KJ5 413 NKUABUOA ASHANTI P. O BOX KJ5 413 Ghana
Telephone	e/Mobile No: 024234393
Email:	
Signature	: Date:
NOTE: TI	HE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.