KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

 Student's Full Address

 POST OFFICE BOX 14

 SENYA BERAKU

 SENYA BERAKU CENTRAL CT--0036

 8064

 Sibastare:

 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: MARGARET AWERE

Address: POST OFFICE BOX 14 SENYA BERAKU SENYA BERAKU CENTRAL CT--0036-8064 Ghana

Telephone/Mobile No: 0599197318

Email:

Signature:.....

Date:

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