KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION	A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
IAHN	MED SAMUEL accept the conditions of admission to
pursue a co	the Institute's rules, regulations and any other conditions which may be made from time to
Student's 1	Full Address
P.O BOX	292 ADUM KUMASI
KUMASI A	ASHANTI AS-106-4084
Ghana	
Signature:	Date:
SECTION	B" TO BE COMPLETED BY PARENT/GUARDIAN
	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:	NATHANIEL MORO
Address:	P.O BOX 292 ADUM KUMASI KUMASI ASHANTI AS-106-4084 Ghana
Telephone	/Mobile No: 0248186672
Email:	
Signature:	Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.