KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION	A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
ISAL	IFU HAFIZ SANGO accept the conditions of admission to
pursue a co	ourse in
Student's	Full Address
POST OF	FICE BOX KS 13212
ADUM - k	CUMASI
ACHIASE	- KUMASI ASHANTI AK-
897-1413	
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:	SALIFU YUSSIF SANGO
Address:	POST OFFICE BOX KS 13212 ADUM - KUMASI ACHIASE - KUMASI ASHANTI AK-897-1413 Ghana
Telephone	/Mobile No: 0543543167
Email:	
Signature:	Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.