KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

Student's Full Address	
PO BOX BLOCK O	
CHAIRAPATRE ASHANTI	
CHAIPATIRE	
Ghana	
Signature:	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: OPPOMG SEFA ASARE

Address: P.OBOX BLOCK O CHAIRAPATRE ASHANTI CHAIPATIRE Ghana

Telephone/Mobile No: 024051659

Email:

Signature:..... Da

Date:

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