## **KUMASI TECHNICAL INSTITUTE (KTI)**

## **ADMISSION ACCEPTANCE FORM**



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

I ..... SULEMAN MOHAMMED SANI ...... accept the conditions of admission to

Student's Full Address	
P.O.BOX AS 87	
ASAWASI	
NEW ZONGO-MANHYIRA ASHANTI	
AS-101-1683	
Sibaatare:	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: MOHAMMED ABDELLAH SANI

Address: P.O.BOX AS 87 ASAWASI NEW ZONGO-MANHYIRA ASHANTI AS-101-1683 Ghana

Telephone/Mobile No: 0244653946

Email:

Signature:..... Date: ...

Date: .....

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