KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION	A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
IPAF	RKER RICHELLE accept the conditions of admission to
pursue a co	ourse in
Student's	Full Address
P. O. BOX	(39 OBUASI
OBUASI A	ASHANTI AK-021-9056
Ghana	
Signature	: Date:
<u>SECTION</u>	B" TO BE COMPLETED BY PARENT/GUARDIAN
	I 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:	MR. JOSEPH PARTKER
Address:	P. O. BOX 89 OBUASI OBUASI ASHANTI AK-021-4092 Ghana
Telephone	e/Mobile No: 0243036186
Email:	
Signature	Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.