KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION	N A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
IAD	U ABEL accept the conditions of admission to
pursue a co	ourse in
Student's	Full Address
P. O. BO	X SN 493. KS SANTASI
KUMASI	
KUMASI	ASHANTI AK-021-4092
Ghana	
Signature	: Date:
SECTION	N B" TO BE COMPLETED BY PARENT/GUARDIAN
	d 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:	JONES MARFO
Address:	P. O. BOX SN 493 KS SANTASI KUMASI KUMASI ASHANTI AK-021-4092 Ghana
Telephone	e/Mobile No: 0552512324
Email:	
Signature	: Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.