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

### **ADMISSION ACCEPTANCE FORM**



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

I ..... MASAUWD SUDAIS AKILO ...... accept the conditions of admission to

Student's Full Address	
BOX 11349	
AKWATIALINE	
AKWATIALINE ASHANTI AK-021-	
4098	
Sibanare:	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: MASAUD AKILLO

Address: BOX 11349 AKWATIALINE AKWATIALINE ASHANTI AK-021-4098 Ghana

Telephone/Mobile No: 0242867065

Email:

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

Date: .....

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