KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS)	
I SON	NGRUBE MOSES accept the conditions of admission to
pursue a co	burse in
Student's	Full Address
P. O. BOX	54 ABUAKWA ASKANTI
ABUAKW	A ASHANTI AI-5986-5084
Ghana	
Signature:	Date:
SECTION B" TO BE COMPLETED BY PARENT/GUARDIAN	
	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:	SONGRUBE DANIEL
Address:	P. O. BOX 54 ABUAKWA ASHANTI ABUAKWA ASHANTI ASHANTI AI-5986-5084 Ghana
Telephone	/Mobile No: 0241596682
Email:	
Signature:	Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.