KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS) I DUKU MENSAH EMMANUEL accept the conditions of admission to to abide by the Institute's rules, regulations and any other conditions which may be made from time to time. **Student's Full Address** P.O BOX 186 **OBUASI ASHANTI NY 45** Ghana **Signature:** 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. SHADRACK DUKU MENSAH Name: Address: P.O BOX 186 **OBUASI ASHANTI NY 45** Ghana Telephone/Mobile No: 0545562315 **Email:**

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

Signature:....