

KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I **BOADI KONADU AGNES** accept the conditions of admission to
pursue a course in **AUTOBODY WORKS** and promise
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 54
ASSIN FOSU
ASSIN FOSU CENTRAL A7-0216-
4636

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.

Name: LUCY BOAHEN

Address: P. O. BOX 54 ASSIN FOSU
ASSIN FOSU CENTRAL A7-0216-4636
Ghana

Telephone/Mobile No: 0249606700

Email:

Signature: **Date:**

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