

KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



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

I ASARE GIDEON accept the conditions of admission to
pursue a course in PLUMBING & GAS FITTING 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 DW. 80 DIASO
WESTENG WESTENG CV-1436-5360
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.

Name: JAMES KOFI ASARE

Address: P. O. BOX DW 80 DIASO
CENTTRA CENTRA CV-1436-5360
Ghana

Telephone/Mobile No: 0549207894

Email:

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

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