KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS) 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 89 **DEBISO** SEFWI DEBISO WESTEN NORTH WB00039004 Sibrature: 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. **ERASMUS ASSOW** Name: Address: P O BOX 89 DEBISO SEFWI DEBISO WESTERN NORTH WB00039004 Ghana Telephone/Mobile No: 0246846379 **Email:** Signature:.... Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.