KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A: TO BE COMPLETED BY STUDENT (IN CAPITALS) IAMPOFO MICHEAL OFORI 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 1660, SUAME-KUMASI **SUAME** KUMASI ASHANTI REGION AK-054-5943 Sibratare: 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. MRS. CYNTHIA AMPOFO Name: **Address:** P.O.BOX 1660, SUAME-KUMASI SUAME KUMASI ASHANTI REGION AK-054-5943 Ghana Telephone/Mobile No: 0244677500 blessedboy8000@gmail.com Email: Signature:....

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.