KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



I DEBRAH PHILIP KOFI accept the conditions of admission to

Student's Full Address

P,O,BOX 156 FEYIASE ASHANTI AT-1317-6491 Ghana

Q• 4	D 4
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: JOSEPH KOFI DEBRAH

Address: P.O.BOX 156

FEYIASE ASHANTI AT-1317-6491

Ghana

Telephone/Mobile No: 054020194

Email:

Signature: Date:

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