KUMASI TECHNICAL INSTITUTE (KTI)

ADMISSION ACCEPTANCE FORM



SECTION A	A: TO BE COMPLETED BY STUDENT (IN CAPITALS)
I OWU	JSU JEHOSHAPHAT GYAN accept the conditions of admission to
pursue a cou	the Institute's rules, regulations and any other conditions which may be made from time to
Student's F	ull Address
P.O.BOX S	. A. 9
SABIN AKE	ROFROM
SABIN AKE	ROFROM ASHANTI AG-
0690-9617	
Signature: .	Date:
	B" TO BE COMPLETED BY PARENT/GUARDIAN
	the rules, regulations and conditions regarding my ward's admission and I agree that he/she prolled at Kumasi Technical Institute on the basis of what I have read.
Name:	ISAAC ADDAI
9	P.O.BOX S. A. 9 SABIN AKROFROM SABIN AKROFROM ASHANTI AG-0690-9617 Ghana
Telephone/	Mobile No: 0546902915
Email:	
Signature:	Date:

NOTE: THE COMPLETED ACCEPTANCE LETTER SHOULD BE RETURNED TO THE

PRINCIPAL NOT LATER THAN 14 DAYS AFTER DOWNLOADING/PRINTING.