



FORM: CMTC/A

LETTER OF ACCEPTANCE
(To be completed by those accepting the offer)

Dear Sir/Madam,

Candidate's Name

(Surname/Last Name)

(Other names)

Admission No. _____ ID/Birth Cert. No. _____

With reference to your letter offering me a place in the Department of

For a course leading to the Diploma/Certificate/ Artisan of

This is to confirm that I **DO ACCEPT** the offer and I **PROMISE TO ABIDE** by the Rules and Regulations governing the Conduct and Discipline of the student of Cleveland medical Training College and I hereby undertake to complete the course for which I have been accepted unless I am requested to discontinue by the College Management.

I shall accept the regulations made from time to time for the good order and governing of the college.

Yours faithfully,

Signature of Candidate: _____ Date: _____

NOTE: If you are not accepting this offer, please complete CMTC/B