

## ACCEPTANCE FORM

(To be completed by the head of school or his/her delegated authority)

We accept Mr STELLA OHENE ADUBEA for placement in our school for his/her internship.

Name and Address of School: ST. JOHN'S GRAMMAR SHS

Name of Officer: JOHN S. ABORIA Position: ASST. HEAD (AC)

Signature: [Signature] Date: 22-08-24

ASST. HEAD (ACADEMIC)  
ST. JOHN'S GRAMMAR SHS  
ACHIMOTA