



**TAKORADI  
TECHNICAL  
UNIVERSITY**

**INDUSTRIAL LIAISON OFFICE**

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**ASSUMPTION OF DUTY FORM**

**PARTICULARS OF STUDENT**

Registration number: **BT/AMT/22/041**

Name: **EDMUND GARDENER ELLIOT**

Programme: **BACHELOR OF TECHNOLOGY IN INFORMATION AND COMMUNICATION TECHNOLOGY  
(APPLICATIONS MANAGEMENT)**

Year of study: **I**

Telephone number (mobile): **0279038909**

Contact address:

Email: **BTAMT22041@TTU.EDU.GH**

Date of commencement of training: **05/06/2023**

**PARTICULARS OF COMPANY/ORGANISATION**

Company's/Organisation's name: **AMALITECH SERVICES**

Company's address: **27 AMA AKROMA RD, TAKORADITAKORADI**

Company's contact number(s): **0200200966**

Company's email: **Info@amalitech.org.com**

Exact location of company (using landmarks): **TTU ODURO BLOCK**

Name of Industry-Based Supervisor: **SALAMI SULEIMAN**

Phone number of Industry-Based Supervisor: **0248013712**

Subzone: **Western Region(Takoradi Township)**

Company's Stamp and date

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Signature of Industry-based supervisor and date

-----  
Signature of student and date

**FOR OFFICE USE**

Date form received: -----

Action taken by (name & signature of officer): -----

**NB** This form must be completed and forwarded to the **Industrial Liaison Officer, Takoradi Technical University, Box 256, Takoradi**, by student concerned **within seven days** of assumption of duty.

**OFFICE DIRECT LINE 03120-22643, 0202116116**

**EMAIL: [liaison@ttu.edu.gh](mailto:liaison@ttu.edu.gh)**



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