

ASSOCIATION OF DRIVING INSTRUCTORS OF NIGERIA (ADIN)



Affix
Paasport

MEMBERSHIP DATABASE FORM

1. Name of Driving School _____
2. Address of Driving School _____
3. Name of Proprietor / Chief Instructor _____
4. Educational Qualification _____
5. Educational Qualification _____
6. Form of Registration (a) with CAC, (b) Others _____
7. Training Attended _____
8. Year of Registration _____
9. Business Services _____
10. Status - (a) Accredited by FRSC _____, (b) Awaiting FRSC Accreditation _____
11. Year of Accreditation _____
12. Are you a Registered Member of ADIN _____
13. What Year Did You Start Driving School Business _____
14. How Many Branches Do You Have & Where? _____
15. Telephone Number of Chief Executive _____
16. Email _____
17. Website _____
18. Are You Active in Your Unit Chapter of ADIN? _____
19. Are You Active in Your State Chapter of ADIN? _____
20. Are You Active in Your Zonal Chapter of ADIN? _____
21. Your Comments & Suggestions to ADIN _____

Name Signature & Date