



DRIVERS ASSOCIATION OF ZIMBABWE

APPLICATION FOR INDIVIDUAL MEMBERSHIP / REGRADING

<u>For official use only</u>		Recommended class	
Membership No.		Citation	
Certificate No.		Processing fee receipt	
Date of assessment	/ /	Authorised Signature	

INSTRUCTIONS TO APPLICANTS

1. Please complete all the relevant sections. Entries may either be typed or handwritten in block letters, using either blue or black ink only.
2. If the space provided in any section of the form is inadequate, please use additional sheet and attach them to the form

SECTION A: APPLICATION DETAILS (tick where applicable)

Application type	New member	<input type="checkbox"/>	Membership re-grading	<input type="checkbox"/>
Grade applied for	Fellow	<input type="checkbox"/>	Associate	<input type="checkbox"/>
			Student	<input type="checkbox"/>
				Affiliate
Preferred Chapter affiliation	Bulawayo	<input type="checkbox"/>	Gweru	<input type="checkbox"/>
			Harare	<input type="checkbox"/>
			Mutare	<input type="checkbox"/>
			Masvingo	<input type="checkbox"/>

SECTION B: PERSONAL DETAILS (Attach certified copy of ID, Drivers Licence, Medical Aid Certificate, DDC & Passport Photo).

Title		Male	<input type="checkbox"/>	Female	<input type="checkbox"/>
Surname		First name(s)			
Date of birth	/ /	ID Number			
Drivers Licence No.		Obtained & Class			
Passport No.		Expiry date			
Postal address					
Physical address					
Email address					
Alt. email address					
Phone number	Business		Mobile		

SECTION C: ACADEMIC AND PROFESSIONAL QUALIFICATIONS

Please list all relevant post-high school academic and professional qualifications e.g.. certifications etc. Certified copies of Certificate and will be required for validation. Applicants for student membership should provide a copy of a valid ID card.

Institution	Qualification obtained	Start date	Completion date	Class/Grade (if applicable)	<i><u>Official Use</u></i>
NB - If there is insufficient space to provide all available detail, please use a separate sheet to capture the additional information					

SECTION D: PROFESSIONAL EXPERIENCE AND SKILLS (AWARDS / MEDALS)

D1 - PROFESSIONAL EXPERIENCE (Attach reference letters if any)

Company name and address	Role title & brief description of key responsibilities	Duration		<i><u>Official Use</u></i>
		From	To	
NB - If there is insufficient space to provide all available detail, please use a separate sheet to capture the additional information				

D2 - Competition and Awards won

Name of Competition	Class Won	Place Held	Date	<i><u>Official Use</u></i>
NB - If there is insufficient space to provide all available detail, please use a separate sheet to capture the additional information				

SECTION E: INTERESTS AND MOTIVATION

What is your primary reason for joining the DAZ															
Would you be interested in serving on a Chapter Committee?						Yes		<input type="checkbox"/>		No		<input type="checkbox"/>			
Hobbies/leisure activities			Indoor						Outdoor						
Have you previously held a position within DAZ?						Yes		<input type="checkbox"/>		No		<input type="checkbox"/>		If yes, please provide detail below	
Role (e.g. President, Committee member)				Level(tick the applicable) Council Chapter SIG						Period From To					
										mm/yy		mm/yy			

SECTION F: DECLARATION BY APPLICANT

1. I hereby apply for admission to the Drivers Association of Zimbabwe.
2. I undertake to abide by the Constitution, Code of Ethics, (Standards of Professional Practice, Rules and by-laws of the Association
3. I hereby enclose proof of payment of the non-refundable application processing fee*

Applicant's signature:	Date:
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* Applicants who supply proof that they are bona fide students and wish to apply for Student membership are exempt from the processing fee, but are expected to pay the first years' subscription fee at the prescribed rate.

For any further details and assistance do not hesitate to get in touch with our secretariat
Alternatively you can visit us at Stand No. 9162 Glen Norah C , Harare

