

**FORM MVA 26**  
**NIGER STATE OF NIGERIA**  
**DRIVING SCHOOL REGISTRATION FORM**



1. DRIVING SCHOOL DETAILS

(i) NAME OF SCHOOL

(ii) ADDRESS

TEL  MOBILE  FAX

NAME OF PROPRIETOR

(iii) NAME OF CHIEF INSTRUCTOR/INSPECTOR

(iv) QUALIFICATION(S)

**FACILITIES**

(i) DRIVING RANGE AVAILABLE  NOT AVAILABLE

(ii) INSPECTION - AVAILABLE  NOT AVAILABLE

(iii) DEMONSTRATION AVAILABLE  NOT AVAILABLE

(iv) LIST OF INSTRUCTOR AND QUALIFICATIONS:

(a)

(b)

(c)

(d)

(e)

(f)

(v) COURSES OFFERED:

(a)

(b)

(c)

(d)

(e)

(f)

(vi) DURATION OF TRAINING

(vii) NO. OF TRAINING SESSIONS

**EQUIPMENT:**

(i) STIMULOR(S) (NO. AVAILABLE)

(ii) DEMONSTRATION VEHICLE(S)