FEDERAL ROAD SAFETY CORPS



NATIONAL HEADQUARTERS 4 MAPUTO STREET, ZONE 3, WUSE, ABUJA

Affix Passport Photograph here

(Annexure 'D')

2025 APPOINTMENT OF DCMs

1.	Name:	
	(Surname)	(Other Names)
2. Rank: PIN:		PIN:
3.	Date of Birth:	Sex:
4.	Qualifications:	
5.	Date of 1st Appt:	
6.	Date of Last Promotion:	Present Appt:
7.	Present Command:	Date of Retirement:
8.	Achievements while on the Rank (Attach evidence and not more than 3 pages):	
9.	Attestation by Officer:	
·		, attest that all the information given
ıbove	are true to the best of my knowledg	ge.
	Signature by Officer	Date

NB: CANDIDATES ARE TO COMPLETE SIX (6) COPIES OF THIS FORM AND SUBMIT AHEAD OF ORAL INTERVIEW