



AUTOMOBILE ASSOCIATION OF KENYA  
P O BOX 40087 00100 NAIROBI  
Tel: 020 825060-6 Email: drivercentre@aakenya.co.ke

**APPLICANT DRIVER DETAILS**

REF NO (AA USE) \_\_\_\_\_

DATE \_\_\_\_\_

SURNAME			
OTHER NAMES			
DATE OF BIRTH			
NATIONALITY			
PASSPORT/ ID NO			
APPLICANT'S CONTACT			
MARITAL STATUS			
SEX (MALE/FEMALE)			
DRIVING LICENCE CLASS			
MANUAL/AUTOMATIC DRIVE			
DRIVING EXPERIENCE(YEARS)			
HIGHEST EDUCATION LEVEL			
CURRENT EMPLOYER			
MINIMUM EXPECTED SALARY			
AA DRIVER COURSES ATTENDED			
LANGUAGES (SPOKEN)			
OTHER PROFESSION			
PREVIOUS EMPLOYERS	PERIOD	POSITION	REASON FOR LEAVING
1			
2			
REFEREES	TEL	POSTAL ADDRESS	COMPANY/INSTITUTION
1			
2			
PREFERRED WORKING REGIONS			
APPLICANT'S SIGNATURE			

**FOR AA USE ONLY**

ASSESSMENT FEE PAID	
RECEIPT NO	
JOB SUITABILITY/CATEGORY	
REMARKS	
RECOMMENDED TO	
APPOINTMENT DATE	
ENTRY LEVEL SALARY	

\* Attach a passport size photo.

\* **PLEASE NOTE** you are only eligible for entry into our database upon passing the driving assessment.