

ALL STATE WOMEN ASSOCIATION OF NIGERIA WORLDWIDE (A.K.A - NEW FACE WOMEN)

For use by the
nation or state
only

APPLICATION FORM FOR MEMBERSHIP

Photograph
write at the back of
the recent
photograph
(Passport size) your
application will be
deem incomplete if
photograph is
omitted

INSTRUCTION

Before completing this Membership Form, please read the profile of the Association to be sure whether you are eligible to be a member. Each new member must complete two (2) copies of this form.

- (A) NAME IN FULL (Block Letters, underlining the formal or family name)
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- (B) SEX (C) TITLE (Mrs, Miss e.t.c)
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2. NATIONALITY AND/OR CITIZENSHIP:.....
3. PLACE AND DATE OF BIRTH:.....
4. RELIGION:.....
5. FAMILY (INDICATE).
- (a) MARRIED.....
- (b) SINGLE MOTHER.....
- (c) YOUTH.....
6. (a) ADDRESS (For Correspondence).....
- (b) TELEPHONE NO..... (C) Email.....
7. ADDRESS OF PERMANENT RESIDENCE (If not same as 6).....
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8. LANGUAGE PROFICIENCY
- (a) List those languages in which you claim general proficiency.....
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- (b) Please evaluate your competence to follow instructions
- (i) English and (ii) in language other than English
- | Knowledge of English | Knowledge of..... |
|---|--|
| Reading – Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> | Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> |
| Speaking – Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> | Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> |
| Writing – Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> | Good <input type="checkbox"/> Average <input type="checkbox"/> Poor <input type="checkbox"/> |
9. Present Occupation or employment.....
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10. PREFERENCE/ CONTRIBUTION (After going through the profile ASWAON (w) and seeing her Aims and Objectives, you May prefer to see the achievement of one of the aims or any decide to add your own idea that can bring Our Nation a good standard.; If so please sate these areas you can contribute (add).

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11. REFERENCE:

(A)	(B)
Name.....	Name.....
Position.....	Position.....
Address.....	Address.....

12. Any other information which you considered relevant the Association

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13. Applicant Signature.

IMPORTANT

- (A) An Applicant must pay \$50.00 (Fifty Dollars Only) to any UBA
BANK ACC NO. 3000909991
DOMICILIARY ACCOUNT NAME: ALL SATE WOMEN ASSOCIATION OF NIGERIA WORLDWIDE
And bring the teller to the Appropriate authority and such membership Form must reach the Head Office, 20, Adekoya Street, Bolade Oshodi Bus-Stop and identification card must be issued/sent to the applicant from the Headquarter.
- (B) The Applicant must complete and give all requested information in the form.
- (C) Must Submit It On Time