ኒያላ ኢንሹራንስ አ.ማ
Nyala Insurance S.C
Tel: 251-116-6[illegible]67, Fax: 251-116-62671[illegible]
Protection House, Miky Leland Street
P.O. Box: 12753, Addis Ababa, Ethiopia
e-mail: [illegible]alainsurancesc.com

Foreign Employment Term Assurance (FETAP) Proposal Form

Particulars of the Life Assured:

Mr./Ms./Mrs.
(as written in the passport)

Name: Birke Father's Name: Girma G. Father's Name: Regasa

Date of Birth: 19-Nov-88 Place of Birth: Arsi negele Passport Number: EP9214730 Gender: Female

Address: - Region: oromia City: Aje tale Sub City: Woreda: Kebele: melka H. No.:

Occupation: House maid Marital Status: Merried Labor ID Number: EF10392783

Contact Person in case of Emergency: Name Shimeles Abera Telephone: 0911907276

Particulars of The Travel

Agency Name: Alkaba Agency Contact Name: Nejwa Telephone: 0972302010

Destination Country: Departure (Effective) Date:

Beneficiary Information

I hereby assignee the policy benefits to the flowing beneficiaries. Policy benefit payments are subject required claim documents, court order and liquidation report attested by the court.

Full Name	Relationship	Percentage Share	Address/Telephone
Shimeles Abera	husband	100%	0911907276
		Total	100%

Please attached copy of Passport and Kebele ID to this form.

Name of Life Assured: Birke Girma Signature: [signature] Date: 10-Dec-24