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**Nyala Insurance S.C**

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P.O. Box: 12753, Addis Ababa, Ethiopia  
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## Foreign Employment Term Assurance (FETAP) Proposal Form

### 1. Particulars of the Life Assured:

Title: Mr./Ms./Mrs.

(As printed in the passport)

Name: Mihret Father's Name: Tadese G. Father's Name: Puyata

Date of Birth: 27-Jun-94 Place of Birth: Hawora Passport Number: EQ1131147 Gender: FEMALE

Address: - Region: SNNPR City: Legama Sub City: Legama Woreda: Araka Kebele: Legama H. No.:       

Occupation: Housemaid Marital Status: Married Labor ID Number:       

Contact Person in case of Emergency: Name Tariku Tesfaye Telephone: 0931507884

### 2. Particulars of The Travel

Agency Name: B M G Foreign Employment Agency Agency Contact Name: GETAHUN Telephone: 0911277320

Destination Country: UAE Departure (Effective) Date:       

### 3. 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
i.	<u>Tariku Tesfaye</u>	<u>Husband</u>	<u>100%</u>	<u>0931507884</u>
ii.	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
iii.	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
iv.	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
v.	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
vi.	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
vii.	<u>      </u>	<u>      </u>	<u>      </u>	<u>      </u>
			<b>Total</b>	<b>100%</b>

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

Name of Life Assured: Mihret Tadese Signature:  Date: 15-Apr-25