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**Nyala Insurance S.C**

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Protection House, Miky Leland Street  
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: Belaynesh Father's Name: Aredo G. Father's Name: Kebele

Date of Birth: 11 Sep - 90 Place of Birth: Yerer Sijase Passport Number: EG1047938 Gender: Female

Address: - Region: Oromia City: Arsi Sub City: Arsi Woreda: DKS Kebele: Korenta H. No.: —

Occupation: Housemaid Marital Status: Married Labor ID Number: EF10862446

Contact Person in case of Emergency: Name Feleche Kebele Telephone: 0938458451

### 2. Particulars of The Travel

Agency Name: Aley Agency Agency Contact Name: neway Telephone: 0912805194

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>Feleche Kebele</u>	<u>Husband</u>	<u>50%</u>	<u>Arsi   0938458451</u>
ii.	<u>Aredo Kebele</u>	<u>Father</u>	<u>50%</u>	<u>Arsi   0945515913</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: Belaynesh Aredo Signature:                      Date: 24-4-25