

1. Particulars of the Life Assured:



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Foreign Employment Term Assurance (FETAP) Proposal Form

Agency Contact Name: MOHAMA Address? Telephone: MATA Agency Contact Name: MOHAMA Address? Telephone: MATA Agency Contact Name: MOHAMA Agency C				
Father's Name: MOHAMMEO G. Father's Name: ABADIA The passport Number: EP65320 8-Gender: F. Address: - Region: OROMIRCity: Sub City: ITHMA Woreda: ANAMEDIA Woreda: ANAMEDIA Woreda: ANAMEDIA Marital Status: SINCALE Labor ID Number: Ontact Person in case of Emergency: Name NASER BINA Telephone: 0941483518 Particulars of The Travel gency Name: Alkaba Agency Contact Name: Telephone: Departure (Effective) Date: 24/01/25 Beneficiary Information hereby assignee the policy benefits to the flowing beneficiaries. Policy benefit payments are subject required claim becuments, court order and liquidation report attested by the court. Full Name Relationship Percentage Share Address/Telephone BROTHER (00) Total 100%	itle: Mr./Ms./Mrs.			
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