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Nyala Insurance S.C

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Protection House, Miky Leland Street
P.O. Box: 12753, Addis Ababa, Ethiopia
e-mail: nisco@nyalainsurancesc.com

Foreign Employment Term Assurance (FETAP) Proposal Form

1. Particulars of the Life Assured:

Title: Mr./Ms./Mrs.

(As printed in the passport)

Name: Meseret Father's Name: Teshome G. Father's Name: Legese
Date of Birth: 09-Jan-91 Place of Birth: Deko Passport Number: EQ1914376 Gender: F
Address: - Region: Aronia City: Shewa Sub City: Bishofitu Woreda: Jesso Kebele: - H. No.: -
Occupation: Housemaid Marital Status: Single Labor ID Number: EF10001798
Contact Person in case of Emergency: Name Teshome Legese Telephone: 0912349445

2. Particulars of The Travel

Agency Name: Adley Agency Agency Contact Name: Neway Telephone: 0912805194
Destination Country: Kuwait 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>Adane Abdo</u>	<u>Husband</u>	<u>100%</u>	<u>0912595028</u>
ii.	<u> </u>	<u> </u>	<u> </u>	<u>Bishofitu</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>
			Total	100%

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

Name of Life Assured: Meseret Signature: [Signature] Date: 6-8-25