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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: Dirbie Father's Name: Bejga G. Father's Name: Buta
Date of Birth: 20-Oct-89 Place of Birth: Wony Passport Number: EA2464447 Gender: Female
Address: - Region: Oromia City: Moro Sub City: Moro Woreda: Say Kebele: Say H. No.: -
Occupation: Housemaid Marital Status: Married Labor ID Number: EF11412333
Contact Person in case of Emergency: Name Dirbie Abebe Telephone: 09-12-80-89-39

2. Particulars of The Travel

Agency Name: Adey Agency Agency Contact Name: Neway Telephone: 0912 809194
Destination Country: Qatar 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>Taytu Kunbe</u>	<u>Mother</u>	<u>100%</u>	<u>Moro 09-49-87-93-76</u>
ii.	_____	_____	_____	_____
iii.	_____	_____	_____	_____
iv.	_____	_____	_____	_____
v.	_____	_____	_____	_____
vi.	_____	_____	_____	_____
vii.	_____	_____	_____	_____
			Total	100%



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

Name of Life Assured: Dirbie Bejga Signature: [Signature] Date: 12-Aug-2025