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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: Arega G. Father's Name: Rotore

Date of Birth: 7-Oct-95 Place of Birth: Gibe Passport Number: EQ1383025 Gender: Female

Address: - Region Central City: Harar Sub City: Gibe Woreda: gombora Kebele: - H. No.: -

Occupation: Housemaid Marital Status: Single Labor ID Number: -

Contact Person in case of Emergency: Name Arega Rotore Telephone: 0928844597

2. Particulars of The Travel

Agency Name: Al-kaba Agency Contact Name: Nejwa Telephone: 0972302070

Destination Country: Dubai 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>Arega Rotore</u>	<u>Father</u>	<u>100%</u>	<u>0928844597</u>
ii.				
iii.				
iv.				
v.				
vi.				
vii.				
			Total	100%

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

Name of Life Assured: Meseret Signature: [Signature] Date: 10-Feb-25