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**Nyala Insurance S.C**

Tel: 251-116-626667, Fax: 251-116-626706  
Protection House, Miky Leland Street  
P.O. Box: 12753, Addis Ababa, Ethiopia  
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# Foreign Employment Term Assurance (FETAP) Proposal Form

## Particulars of the Life Assured:

Title: Mr./Ms./Mrs.

As printed in the passport)

Name: Tigist Father's Name: Wolde G. Father's Name: Bulcha

Date of Birth: 28-Apr-95 Place of Birth: Woliso Passport Number: EP6311833 Gender: FEMALE

Address: - Region: \_\_\_\_\_ City: \_\_\_\_\_ Sub City: \_\_\_\_\_ Woreda: \_\_\_\_\_ Kebele: \_\_\_\_\_ H. No.: \_\_\_\_\_

Occupation: Housemaid Marital Status: Single Labor ID Number: \_\_\_\_\_

Contact Person in case of Emergency: Name Abera Wolde Telephone: 0967351017

## Particulars of The Travel

Agency Name: B M G Foreign Employment Agency Agency Contact Name: GETAHUN Telephone: 0911277320

Destination Country: UAE Departure (Effective) Date: \_\_\_\_\_

## Beneficiary Information

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>Abera Wolde</u> | <u>Brother</u> | <u>100%</u>      | <u>0967351017</u> |
| ii.  | _____              | _____          | _____            | _____             |
| iii. | _____              | _____          | _____            | _____             |
| iv.  | _____              | _____          | _____            | _____             |
| v.   | _____              | _____          | _____            | _____             |
| vi.  | _____              | _____          | _____            | _____             |
| vii. | _____              | _____          | _____            | _____             |
|      |                    |                | <b>Total</b>     | <b>100%</b>       |

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

Name of Life Assured: Tigist Wolde Signature: [Signature] Date: 17-Jan-25