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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: Girma G. Father's Name: Teka

Date of Birth: 16-May-93 Place of Birth: Anaki Passport Number: GP6669615 Gender: \_\_\_\_\_

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

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

Contact Person in case of Emergency: Name Meseret Kebede Telephone: 0929414967

### 2. Particulars of The Travel

Agency Name: BMG Agency Agency Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Destination Country: \_\_\_\_\_ 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>Masho Chew</u>	<u>Husband</u>	<u>100%</u>	<u>0982258584</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: Meseret Girma Signature: [Signature] Date: 25-Jan-25