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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: ETENESH Father's Name: GEBURE G. Father's Name: SAWO

Date of Birth: 11-sep-92 Place of Birth: SIKO Passport Number: Ep7739312 Gender: Female

Address: - Region: C-Ethiopia City: Hadaya Sub City: Hosana Woreda: Sidan Kebele: 8 H. No.:

Occupation: House maid Marital Status: married Labor ID Number: EF10373697

Contact Person in case of Emergency: Name KIREMO Shango Telephone: 0961435371

### 2. Particulars of The Travel

Agency Name: MY AGENCY Agency Contact Name: Merima ALI Telephone: 0901116677

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>KIREMO Shango</u>	<u>Brother</u>	<u>100%</u>	<u>Hosana/0961435371</u>
ii.	<u></u>	<u></u>	<u></u>	<u></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>
			<b>Total</b>	<b>100%</b>



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

Name of Life Assured: ETENESH GEBURE Signature: [Signature] Date: 8-7-2025