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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
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: Werkije Father's Name: Deneke Deneke G. Father's Name: Mandefro

Date of Birth: 02 Jan 85 Place of Birth: Shoa Passport Number: EP 8960400 Gender: FEMALE

Address: - Region: Oromiya City: Finfine Sub City: Sheger city Woreda: Sheger city Kebele: Sheger city H. No.: Sheger city

Occupation: HOUSE maid Marital Status: married Labor ID Number: Sheger city

Contact Person in case of Emergency: Name Hayle Gemechu Telephone: 09 13617469

2. Particulars of The Travel

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

Destination Country: UAE Departure (Effective) Date: Sheger city

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>Werkije Haylu Gemechu</u>	<u>Husband</u>	<u>100%</u>	<u>Ancho</u>
ii.				
iii.				
iv.				
v.				
vi.				
vii.				
			Total	100%

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

Name of Life Assured: Werkije Signature: UL & B Date: Sheger city