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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: Zekya Father's Name: Jemal G. Father's Name: Shahcho

Date of Birth: 11-Sep-87 Place of Birth: Siite Passport Number: EP7138798 Gender: Female

Address: - Region: Central City: Siite Sub City: Siite Woreda: Siite Kebele: Asira H. No.: -

Occupation: Housemaid Marital Status: married Labor ID Number: EF11128999

Contact Person in case of Emergency: Name Jemal Redi Telephone: 09-26-34-40-00

### 2. Particulars of The Travel

Agency Name: Adey Agency Agency Contact Name: Neway Telephone: 0912805194

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>Jemal Redi</u>	<u>Husband</u>	<u>50%</u>	<u>Enseno / 0926344000</u>
ii.	<u>Jemal Shahcho</u>	<u>Father</u>	<u>50%</u>	<u>Enseno / 093648255</u>
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: Zekya Jemal Signature: [Signature] Date: 3-Jul-2025