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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: Tigist Father's Name: Kassa G. Father's Name: Hirgato

Date of Birth: 15-Jan-95 Place of Birth: Bushuylaga Passport Number: 608942911 Gender: female

Address: - Region: South City: South Sub City: bambata Woreda: - Kebele: Zemaro H. No.: -

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

Contact Person in case of Emergency: Name Robalo Telephone: 0913770718

2. Particulars of The Travel

Agency Name: Adey agency Agency Contact Name: nowsay Telephone: 0917805194

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>Ayeleah Kasa</u>	<u>mother</u>	<u>50%</u>	<u>South/0905610190</u>
ii.	<u>Kasa Hirgato</u>	<u>father</u>	<u>50%</u>	<u>South/0905610190</u>
iii.				
iv.				
v.				
vi.				
vii.				
			Total	100%



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

Name of Life Assured: Tigist Kassa Signature: [Signature] Date: 26-Oct-24