ኒያላ ኢንሹራንስ አ.ማ
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: Meko Father's Name: Tura G. Father's Name: Felo

Date of Birth: 13-Jan-87 Place of Birth: Dera Passport Number: EP2459576 Gender: Female

Address: - Region: Oromia City: Arsi Sub City: Arsi Woreda: dera Kebele: diseka H. No.: New

Occupation: House Maid Marital Status: Married Labor ID Number: EFIII39169

Contact Person in case of Emergency: Name Jibril Hussein Telephone: 09-11-8383-20-37

2. Particulars of The Travel

Agency Name: Adey Agency Agency Contact Name: Neway Telephone: 09-12-80-91-94

Destination Country: Jordan 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.	Jibril Hussein	Husband	50%	Dera/09-11-8320-37
ii.	Fifa Jibril	Son	50%	Dera/07-04-40-3989
iii.				
iv.				
v.				
vi.				
vii.				
		Total		100%

ADEY FOREIGN EMPLOYMENT AGENCY P.L.C 0911 22 08 45 0911 25 90 56 011 5 62 02 62

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

Name of Life Assured: Meko Tura **Signature:** _____ **Date:** 20-may-2025