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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: Zinash Father's Name: Nesru G. Father's Name: Hasen

Date of Birth: 08-Jul-95 Place of Birth: Addis Ababa Passport Number: EP7395390 Gender: Female

Address: - Region: Addis Ababa City: Addis Ababa Sub City: Addis Ketema Woreda: 12 Kebele: 08 H. No.: —

Occupation: Housemaid Marital Status: Married Labor ID Number: EF10351570

Contact Person in case of Emergency: Name Zedine Bederu Telephone: 0908210642

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>Zedine Bederu</u>	<u>Husband</u>	<u>100%</u>	<u>0908210642</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>
			Total	100%

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

Name of Life Assured: Zinash Nesru Signature: Zinash Date: 20-Mar-25