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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: Zewudtu Father's Name: Zaza G. Father's Name: Shalemo
Date of Birth: 14-Sep-91 Place of Birth: Suke Passport Number: EP9045479 Gender: Female
Address: - Region: Addis Ababa City: - Sub City: Leni-Kura Woreda: 10 Kebele: - H. No.: -
Occupation: Housemaid Marital Status: Married Labor ID Number: EF10669243
Contact Person in case of Emergency: Name Bedelu Mano Telephone: 0923402671

2. Particulars of The Travel

Agency Name: Al-kaba Agency Contact Name: Nejwa Telephone: 0972302070
Destination Country: UAE 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>Zaza Shalemo</u>	<u>Father</u>	<u>100%</u>	<u>0955377097</u>
ii.				
iii.				
iv.				
v.				
vi.				
vii.				

Total

100%

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

Name of Life Assured: Zewudtu Signature: [Signature] Date: 4-Feb-25