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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: Kelem

Father's Name: Mamo

G. Father's Name: Tilahun

Date of Birth: 3-sep-88 Place of Birth: Wayo Passport Number: E. Q1242142 Gender: Female

Address: - Region: Amhara City: Wayo Sub City: Wayo Woreda: - Kebele: - H. No.: -

Occupation: House maid Marital Status: Married Labor ID Number: -

Contact Person in case of Emergency: Name Aweke Getachew Telephone: 0941143379

2. Particulars of The Travel

Agency Name: Al-kaba Agency Contact Name: Wejwa Telephone: 0972302010

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>Aweke Getachew</u>	<u>Husband</u>	<u>100%</u>	<u>0941143379</u> <u>097230</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: Kelem

Signature: [Signature]

Date: 21-Dec-24