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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: Meskeiu Father's Name: Gereme G. Father's Name: Mindaye

Date of Birth: 10 Nov 99 Place of Birth: Burayu Passport Number: EP7900372 Gender: F

Address: - Region: Oromia City: Sheger city Sub City: Gefersa Woreda: Faje Kebele: _____ H. No.: _____

Occupation: House maid Marital Status: married Labor ID Number: EE10540222

Contact Person in case of Emergency: Name Gretu demesu Telephone: 0946754445

2. Particulars of The Travel

Agency Name: BMG Agency Agency Contact Name: Getahun Telephone: 0911277320

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>Gereme mindaye</u>	<u>Father</u>	<u>100%</u>	<u>0919839309</u>
ii.	_____	_____	_____	_____
iii.	_____	_____	_____	_____
iv.	_____	_____	_____	_____
v.	_____	_____	_____	_____
vi.	_____	_____	_____	_____
vii.	_____	_____	_____	_____
			Total	100%

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

Name of Life Assured: Meskeiu Signature: [Signature] Date: 11/02/25