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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: Zeineba Father's Name: Mudo G. Father's Name: Habib

Date of Birth: 3-Aug-91 Place of Birth: Senite Passport Number: EQ2555212 Gender: female

Address: - Region: Q.Ethio City: Gurage Sub City: sereti Woreda: Asheti Kebele: sereti H. No.: new

Occupation: Housemaid Marital Status: Married Labor ID Number: EF11014954

Contact Person in case of Emergency: Name Naser chiku Telephone: 0904170741

2. Particulars of The Travel

Agency Name: Aden Agency Agency Contact Name: Naway Telephone: 0912085144

Destination Country: Dubai 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>Naser chiku</u>	<u>Spouse</u>	<u>100%</u>	<u>0904170741</u>
ii.	_____	_____	_____	_____
iii.	_____	_____	_____	_____
iv.	_____	_____	_____	_____
v.	_____	_____	_____	_____
vi.	_____	_____	_____	_____
vii.	_____	_____	_____	_____
			Total	



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

Name of Life Assured: Zeineba Mudo Signature: H0177 Date: 7-Aug-25