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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: Tigist Father's Name: gebri G. Father's Name: bekele

Date of Birth: 01-Oct-85 Place of Birth: Addis Ababa Passport Number: Ep8934652 Gender: Female

Address: - Region: AIA City: AIA Sub City: Abaki Kality Woreda: 04 Kebele: - H. No.: -

Occupation: Housemaid Marital Status: Single Labor ID Number: -

Contact Person in case of Emergency: Name Zenebech Tjnam Telephone: 09-23-61-08-71

2. Particulars of The Travel

Agency Name: Aday 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>Zenebech Tjnam</u>	<u>mother</u>	<u>100%</u>	<u>AIA/0923610871</u>
ii.				
iii.				
iv.				
v.				
vi.				
vii.				
			Total	100%



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

Name of Life Assured: Tigist + gebri Signature: Tigist Date: 08-Oct-24