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: Rahmet Father's Name: Kassaw G. Father's Name: EBRE

Date of Birth: 5/Dec/98 Place of Birth: Desse Passport Number: EQ2082945 Gender: FEMALE

Address: - Region: Amhara City: _____ Sub City: Desse Woreda: 04 Kebele: 04 H. No.: _____

Occupation: House Maid Marital Status: Single Labor ID Number: _____

Contact Person in case of Emergency: Name Hana Telephone: 0983660577

2. Particulars of The Travel

Agency Name: B M G Foreign Employment Agency Agency Contact Name: GETAHUN Telephone: 0911277320

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.	Hana Hamdu	Aunt	100%	0983660577
ii.				
iii.				
iv.				
v.				
vi.				
vii.				
			Total	**100%**

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

Name of Life Assured: Rahmet **Signature:** _____ **Date:** 2/7/2025