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Nyala Insurance S.C
Tel: 251-116-626667 Fax: 251-116-626706
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: Agare Father's Name: Abebe G. Father's Name: Deboch

Date of Birth: 20 sep 89 Place of Birth: Isenji Passport Number: EP6662243 Gender: FEMALE

Address: - Region: Oromia City: Adama Sub City: Adama Woreda: Woni Kebele: Woni H. No.: Woni

Occupation: House maid Marital Status: married Labor ID Number: EF10910139

Contact Person in case of Emergency: Name Andualem gesese Telephone: 0912493657

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.	<u>Abebe deboch</u>	<u>Father</u>	<u>100%</u>	<u>09 23 03 99 58</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: Agare Signature: [Signature] Date: 22/04/25