

1. Particulars of the Life Assured:



## ኒያላ ኢንሹራንስ አ•ማ 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

Tide Ma Ma Ma			
Title: Mr./Ms./Mrs.			
(As printed in the passport)			
			Name: <u>Jiregn</u> q
Date of Birth: 11-507. 98 Place of Birth: Democreta Passport Number: Et 7636180 Gender: Fenale			
Address: - Region: Oroma City: Wollege Sub City: Wollege Woreda: Subus Kebele: H. No.: New			
Occupation: House maid Marital Status: Marife Labor ID Number:			
Contact Person in case of Emergency: Name Janche Muleta Telephone: 9401670.84			
2. Particulars of The Travel			
Agency Name: Adey Agency Contact Name: Name: Name: S912885190			
Destination Country: 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. Genechy Muleta	Sporse	Nov Jany	0949167084
ii		6	
iii.		29 20 29 5 110	
iv.		S 88 ZZ LL60	-
V		7. 300 S	
vi.		3324 211	2
vii.			
		Total	100%
Please attached copy of Passport and Kebele ID to this form.			
Name of Life Assured: Kebebu lenn Signature: Date: 17-Jun-25			