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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: BIRKI Father's Name: NEGASHU G. Father's Name: IDEE

Date of Birth: 27 FEB 88 Place of Birth: ARSI Passport Number: EQ2512458 Gender: F

Address: - Region: OROMIA City: ARSI Sub City: ARSI Woreda: ADSELA Kebele: ADSELA H. No.: ADSELA

Occupation: HOUSE MAID Marital Status: MARRIED Labor ID Number: ADSELA

Contact Person in case of Emergency: Name FEKADU NEGASHU Telephone: 0924239705

2. Particulars of The Travel

Agency Name: ALMARA Agency Contact Name: NEWAL Telephone: 0925696969

Destination Country: KWT. Departure (Effective) Date: ADSELA

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>FEKADU NEGASHU</u>	<u>BROTHER</u>	<u>100%</u>	<u>ADSELA</u>
ii.	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>
iii.	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>
iv.	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>
v.	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>
vi.	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>
vii.	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>	<u>ADSELA</u>
			Total	100%

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

Name of Life Assured: Birki Signature: ADSELA Date: 11/07/25