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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: Monsa Father's Name: Kelifa G. Father's Name: Abdujelli

Date of Birth: 11-Sep-90 Place of Birth: Arsi Passport Number: EP7661819 Gender: Female

Address: - Region: Oromia City: Tejo Sub City: Arsi Woreda: Tejo Kebele: 09 H. No.: —

Occupation: Housemaid Marital Status: Married Labor ID Number: EFCYT60621

Contact Person in case of Emergency: Name Beker Jarso Telephone: 0925798937

2. Particulars of The Travel

Agency Name: Adcy 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>Kelifa Abdujelli</u>	<u>Father</u>	<u>50%</u>	<u>Arsi/0922030810</u>
ii.	<u>Beker Jarso</u>	<u>Husband</u>	<u>50%</u>	<u>Arsi/0925798937</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: Monsa Kelifa Signature: Monsa Date: 26/4/25