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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: Hakima Father's Name: Jundi G. Father's Name: Gena

Date of Birth: 4-Oct-96 Place of Birth: Robe Passport Number: CP7271255 Gender: Female

Address: - Region: Oromia City: Arsi Sub City: Arsi Woreda: Rube Kebele: 02 H. No.: New

Occupation: House maid Marital Status: Single Labor ID Number: \_\_\_\_\_

Contact Person in case of Emergency: Name Abader Jundi Telephone: 0930793844

### 2. Particulars of The Travel

Agency Name: Adey Agency Agency Contact Name: Norway 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>Jundi Gena</u>	<u>Famer</u>	<u>100%</u>	<u>Arsi/0950990587</u>
ii.	_____	_____	_____	_____
iii.	_____	_____	_____	_____
iv.	_____	_____	_____	_____
v.	_____	_____	_____	_____
vi.	_____	_____	_____	_____
vii.	_____	_____	_____	_____
			<b>Total</b>	<b>100%</b>

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

Name of Life Assured: Hakima Jundi

Signature: [Signature]

Date: 12 June-25