

National Directorate-General for Aliens Policing Országos Idegenrendészeti Főigazgatóság



APPENDIX to an application for a residence permit

(Research or long-term mobility of researchers)

PLEASE COMPLETE THE FORM LEG	IBLY, IN LATIN BLOCK LETTERS.							
1. Legal basis of the application								
research								
long-term mobility of researchers								
In case of a long-term mobility of researchers								
Name of the first Member State:								
Document type of the document issued by the first Member State:								
Document number of the document:								
Date of expiry: year month day								
The application is submitted:								
by the client								
via an employer								
Delivery of the document if the application is submitted via an <u>employer (host entity)</u>: (The employer/host entity will receive the document <u>by way of post</u>.)								
The official contact address of employer (host entity):								
Place of establishment (i.e. registered address) of the employer (host entity):								
Place of receipt of the visa in case of an application of a third-country national staying abroad, submitted <u>via an</u> employer (host entity): country: town/city								
Telephone number:								
Email address:								
2. Information about means of subsistence in Hungary								
amount of expected income from activity:	taxable income in Hungary for the previous year:							
amount of savings held available:	other additional income/properties or assets as means of subsistence:							

3. Other details											
Is another family memb	er accompan	ying	the applica	nt?	yes	no					
Personal data of the fam	ily member i	n cas	se (s)he is t	ravellir	ng togethe	er wit	th the resea	archer			
surname (as shown in the passport): forename (as shown in the passport):											
				f	forename at birth:						
mother's surname and f	orename at b	irth:				sex:		mari	tal status:		
				🗌 male			🗌 u	unmarried married			
						☐ f	emale	W	vidow(er)	divorced	
-			th (cou	(country, locality): degree of relationship:							
year mor	h day										
				spouse person under guardianship of the applicant							
									ore distant descend		
							applicant	t			
					Other, specifically:						
citizenship:				e	thnicity/r	nation	ality (noni	manada	tory data):		
	Infor	nati	ion requi	ired fo	or a sin	gle a	approval	proc	edure		
Information required for a single approval procedure 4. Particulars of the research organisation (employer) in Hungary											
name:											
place of establishment (i.e. registered address):											
postal code:	locality:		,				name of t	he nubl	public place:		
type of the public	-			buildii	ıσ·		stairway:	_	floor:	door:	
place (i.e. street, road,	Street Indillo			ounun	15.		stan way.		1001.	u001.	
square, etc.):											
Employer's tax number				KSH r	number (r	10. re	corded by	the	TEÁOR number	(Hungarian	
/tax identification code:				Hunga	arian Central Statistical Office): NACE number):						
5. Professional qualified			ducationa						cupation before a	rriving in	
required for the positi	on:		orimary sch		-			Hung	Hungary:		
		_	vocational s			ondar	У				
			vocational s		rv schoo	1					
technician educati					-						
				university							
finished less than					3 school years in						
		-	rimary school								
8. Place(s) of work: Will you perform your employment at work-site is located in various counties? Use the employer (located in different											
Will you perform your employment at one single work-site?				counties? une employer (located in different counties)?					in different		
C				no							
yes no				ice (address) of work:				ves 🗖 no			
·	If yes, starting place (ad (postal code)										
address(es):			· ·	dress)	ue)						
(postal code)			(au	uress)							
(address)		• • •			40 7 7						
9. Date of preliminary agreement with the research organisation:10. Job title (FEOR number, i.e. the Hungarian Standard Classification of Occupations):											
year	mont	h	day						·		
11. The applicant's skills and knowledge required for the position											
<u>The period of professional experience</u> relevant to the position to be filled:											
Specific knowledge and skills related to the job to be performed: Language skills											
Native language:											
Other language(s):											

Do you speak Hungarian? 🗌 yes 🗌 no						
Have you ever worked in Hungary before? yes no						
If yes, please indicate the date of expiry of your previous permit:						
Your previous employer in Hungary:						
name:						
address:						
12. In the cases listed in Section 242 (7) of Act XC of 2023, the Government Office is not involved as a specialised						
authority in the single application procedure. Do any of them apply to the applicant?						
 ☐ Yes, Point of Section 242 (7) of Act XC of 2023. (Indicating the case of exempt is mandatory.) ☐ No. 						
13. Shall the applicant's employment be exempt from having a work permit pursuant to Section 15 (1) of Government Decree 445/2013 (of 28 November)?						
Yes , the applicant's employment shall be exempt from having a work permit pursuant to Point of Section 15 (1) of Government Decree 445/2013 (of 28 November). (Indicating the case of exempt is mandatory.)						
No.						
INFORMATION NOTICE						
During the procedure, the immigration authority may request the submission of further documents for clarification of facts of the case.						