Appendix no. 9.18



National Directorate-General for Aliens Policing Országos Idegenrendészeti Főigazgatóság



APPENDIX (White Card)

PLEASE COMPLETE THE FORM LEGIBLY, IN LATIN BLOCK LETTERS.				
1. Particulars of the employment relationship verified in a country outside of Hungary:				
name of the employer:				
place of establishment (i.e. registered add	lress) / address:			
The employer's scope(s) of activity:	Position:		Duration of work that may be performed electronically, as remote work:	
Income for the 6 months immediately pre application:	eceding the submission of the	Other add subsisten	litional income/properties or assets as means of ce:	
2. Particulars of the business with a ver	ified profit in a country outside	e of Hunga	ry:	
name of the business:				
place of establishment (i.e. registered add	ress) / address:			
The employer's scope(s) of activity:	Date of the establishment of the business: Ownership ratio:		Position in the business: Member relationship Executive relationship Other, specifically:	
	Number of persons with ownership share:			
Income for the 6 months immediately preceding the submission of the application:			Other additional income/properties or assets as means of subsistence:	

3. Professional qualification(s):	4. Educational attainment: primary school specialised school vocational school secondary grammar vocational secondary school technician education establishment college university finished less than 8 school years in primary	5. The applicant's activity to be performed in Hungary on the basis of the position held in a(n) employment relationship/business:		
INFORMATION NOTICE				
During the procedure, the immi	gration authority may request the submission of fur the case.	ther documents for clarification of facts of		