Appendix no. 9.19



National Directorate-General for Aliens Policing Országos Idegenrendészeti Főigazgatóság



APPENDIX for an application for a residence permit

(Posted work)

PLEASE COMPLETE THE FORM LEGIBLY, IN LATIN BLOCK LETTERS.									
Border crossing point as place of entry, date of entry : , year month day Member State, in which the applicant is a holder of a residence permit issued for the purpose of employment: day									
Document number and date of expiry of the residence permit document issued by the Member State: , year month day									
1. Particulars of the host of	organisation in Hun	gary							
name:									
place of establishment (registered address) of the establishment:									
postal code:	locality:				name of the public place:				
type of the public place (i.e. street, road, square, etc.):	street number:	building:		stairw	vay:	floor:		door:	
Employer's tax number / tax identification code::			KSH number (no. recorded			TEÁOR number (Hungarian NACE			
			by the Hungarian Central			number):			
			Statistical Office):						
2. Particulars of the postin	ng business / group o	of business	ses or un	dertaki	ngs				
name:									
place of establishment (registered address) of the establishment (country, city/town):									
3. Duration of posted work: year month day									
vocational grammar scho		imary scho ocational sc nar school ocational se chnician ed	ool specialised school chool secondary			6. Occupation	before ar	riving in Hungary:	

	finished less than primary school	8 school years in						
7. Place(s) of work:	Does the nature of the work require that		Will you work on various premises of the					
Will you perform your employment at	your work-site is loc	ated in various	employer (located in different counties)?					
one single work-site? 🗌 yes 🗌 no	counties?							
address(es):	🗌 yes 🔲 no		yes no					
	If yes, the starting pla	ace (address) of work:						
8. Job title (FEOR number, i.e. the Hungarian Standard Classification of Occupations):								
9. The applicant's skills and knowledge required for the position:								
The period of professional experience 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 single permit:								
Your previous employer in Hungary								
Name:								
Address:								
10. Information about means of subsistence in Hungary								
amount of expected income from employment:								
amount of savings held available:		other additional income/properties or assets as means of subsistence:						

INFORMATION NOTICE

During the procedure, the immigration authority may request the submission of further documents for clarification of facts of the case.