



**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 LEGIBLY, IN LATIN BLOCK LETTERS.	
1. Legal basis of the application	
<input type="checkbox"/> research <input type="checkbox"/> 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:	
<input type="checkbox"/> by the client <input type="checkbox"/> via an employer	
Delivery of the document if the application is submitted via an employer (host entity): (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 employer (host entity)</u>:	
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 member accompanying the applicant? <input type="checkbox"/> yes <input type="checkbox"/> no					
Personal data of the family member in case (s)he is travelling together with the researcher					
surname (as shown in the passport):			forename (as shown in the passport):		
surname at birth:			forename at birth:		
mother's surname and forename at birth:			sex: <input type="checkbox"/> male <input type="checkbox"/> female		marital status: <input type="checkbox"/> unmarried <input type="checkbox"/> married <input type="checkbox"/> widow(er) <input type="checkbox"/> divorced
date of birth: year month day		place of birth (country, locality):		degree of relationship: <input type="checkbox"/> parent <input type="checkbox"/> spouse <input type="checkbox"/> person under guardianship of the applicant <input type="checkbox"/> child or a more distant descendant of the applicant <input type="checkbox"/> other, specifically:	
citizenship:			ethnicity/nationality (nonmandatory data):		
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 the public place:	
type of the public place (i.e. street, road, square, etc.):	street number:	building:	stairway:	floor:	door:
Employer's tax number /tax identification code:		KSH number (no. recorded by the Hungarian Central Statistical Office):		TEÁOR number (Hungarian NACE number):	
5. Professional qualification(s) required for the position:		6. Educational attainment: <input type="checkbox"/> primary school <input type="checkbox"/> specialised school <input type="checkbox"/> vocational school <input type="checkbox"/> secondary grammar school <input type="checkbox"/> vocational secondary school <input type="checkbox"/> technician education establishment <input type="checkbox"/> college <input type="checkbox"/> university <input type="checkbox"/> finished less than 8 schoolyears in primary school		7. Occupation before arriving in Hungary:	
8. Place(s) of work: Will you perform your employment at one single work-site? <input type="checkbox"/> yes <input type="checkbox"/> no address(es): (postal code) (address)		Does the nature of the work require that your work-site is located in various counties? <input type="checkbox"/> yes <input type="checkbox"/> no If yes, starting place (address) of work: (postal code) (address)		Will you work on various premises of the employer (located in different counties)? <input type="checkbox"/> yes <input type="checkbox"/> no	
9. Date of preliminary agreement with the research organisation: year month day			10. Job title (FEOR number, i.e. the Hungarian Standard Classification of Occupations):		
11. 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 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.