Dhaka Office of the Embassy of Hungary in New Delhi

Hungarian Visa Application Centre of VFS Bangladesh

Applicants name:…….
Reference number:……..

RESIDENCE PERMIT FOR THE PURPOSE OF FAMILY REUNIFICATION

	SUBMITTED	
GENERAL ENCLOSURES	YES	NO
Dully filled and signed application form for residence permit and Appendix – find it on the website of National Directorate-General for Aliens Policing of Hungary: http://www.bmbah.hu/index.php?option=com_k2&view=item&layout=item&id=54&Itemid=808&lang=en		
Valid passport and the previous (old) passports (at least 2 blank pages in the valid passport are needed and the passport has to be issued within the previous 10 years). The validity period of the valid travel document must have at least three months remaining at the time the authorised duration of residence expires.		
Flight booking		
Statement undertaking the commitment of voluntary exit if the application is refused		
Valid travel insurance		
Police Clearance Certificate		

DOCUMENTS EVIDENCING THE PURPOSE OF RESIDENCE (MANDATORY) (If the original document(s) are NOT in Hungarian, please, attach their official Hungarian translation(s) as well.)	YES	NO
If you apply as a child of the sponsor: your birth certificate with MOFA Attestation or		
If you apply as a spouse of the sponsor: your marriage certificate with MOFA Attestation or		
If you apply as a supported parent of the sponsor: your child's birth certificate with MOFA Attestation or		
If you apply as an adopted child of the sponsor: the document on the adoption.		

DOCUMENTS EVIDENCING SUBSISTENCE	YES	NO
A notarised statement made by the receiving family member promising		

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support and provision to the applicant (mandatory)		
A document in proof of the ability to provide support of the family member promising support, which may be an income certificate issued by the tax authority for the previous year and/or		
A document in proof of the ability to provide support of the family member promising support, which may be an income certificate issued by the employer and/or		
A document in proof of the ability to provide support of the family member promising support, which may be a bank account balance statement and/or		
If you (as the applicant) work, your income certificate issued by the tax authority for the previous year and/or		
If you (as the applicant) work, your income certificate issued by the employer for the previous year and/or		
If you (as the applicant) work, your income certificate issued by the employer for the previous year and/or		
A certificate issued by the employer and/or tax authority evidencing regular income received from abroad.		

DOCUMENTS PROVING THE EXISTENCE OF HUNGARIAN ACCOMMODATION	YES	NO
A residential lease contract or		
A document on accommodation by courtesy, and the consent of the usufruct beneficiary (if the property is burdened by usufruct) or		
A document on accommodation by courtesy, and the consent of the usufruct beneficiary (if the property is burdened by usufruct) or		
Documentary evidence to verify the reservation of accommodation and payment or		
A notarised statement made by a family member providing the accommodation, promising lodging to the applicant or		
A real estate sales contract and a copy of the decision of the competent Budapest or county government agency granting permission for the acquisition of a real estate property.		

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DOCUMENTS EVIDENCING COMPREHENSIVE HEALTHCARE SERVICES	YES	NO
A copy of the social security card issued by Hungarian authorities or		
Business health insurance policy allowing access to comprehensive healthcare services and a document in proof of paying the insurance fee or		
Bank account balance statement on the coverage for possible healthcare service costs.		

Note:

- ***Only original documents are accepted.***
- ***Please bring one extra set of Photocopy of all the documents you wish to submit. Also bring full copy of the valid passport.***
- ***The Consulate reserves the right to request further documentation.***

Contact of applicant (Tel): _____ Email: _____

Signature (applicant): _____ SO Name: _____

Location: _____ Date: _____