Appendix no. 9.10



**National Directorate-General for Aliens Policing**

**Országos Idegenrendészeti Főigazgatóság**

**APPENDIX to an application form for a residence permit**

***(*Intra-corporate transfer and long-term intra-corporate mobility*)***

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| **Please complete the form legibly, In LATIN block letters.** |
|   □ **Issuance of a residence permit for the purpose of intra-corporate transfer**  |
| □ **Issuance of a permit for long-term mobility:** Border crossing point as place of entry, date of entry: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ............... year...........month ...... dayFirst Member State of residence for the purpose of intra-corporate transfer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Document number and date of expiry of the residence permit document issued by the first Member State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, …….year …..month ….day |
| **The application is submitted:**[ ] by the client,[ ]  via an employer **Delivery of the document if the application is submitted via an employer:**(The employer will receive the document **by way of post**.) The official contact address of the employer:      Place of establishment (i.e. registered address) of the employer:      **Place of receipt of the visa in case of an application of a third-country national staying abroad, submitted via an employer:****country:**       **town/city**       |
| **Telephone number:** |
| **Email address:** |
| **1. Information about means of subsistence in Hungary** |
| **amount of expected income from employment:**       | **taxable income in Hungary for the previous year:**       |
| **amount of savings held available:**  | **other additional income/properties or assets as means of subsistence:**  |
| **Information required for conducting a single permit procedure**  |
| **2. Particulars of the Hungarian host entity:** |
| **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):**  |
|  **3. Particulars of the business/group of businesses or undertakings established in a third country:** |
| Name: | Registered address (country, locality):       |
| **4. Position to be filled within the framework of intra-corporate transfer:**[ ] Manager [ ]  Specialist [ ]  Trainee |
| **5. Duration and place of intra-corporate transfer within the territory of the European Union:**Name of the first Member State and planned duration of stay:      Name of the second Member State and planned duration of stay:      Name of additional Member States and planned duration of stay:       |
| **6. Professional qualification(s) required for the position:**  |  **7. Educational attainment:**[ ]  primary school [ ]  specialised school [ ]  vocational school [ ]  secondary grammar school [ ]  vocational secondary school[ ]  technician education establishment[ ]  college [ ]  university [ ]  finished less than 8 school years in primary school | **8. Occupation before arriving in Hungary:** |
| **9. Prior to the intra-corporate transfer, duration of employment relationship with a business or group of businesses/undertakings established in a third country:** | **10. Job title (FEOR number, i.e. the Hungarian Standard Classification of Occupations):**      |
| **11. Place(s) of work:** Will you perform your employment at one single work-site? [ ] yes [ ] no  If yes:      (postal code)      (address) | Does the nature of the work require that your work-site is located in various counties? [ ]  yes   [ ]   no If yes, starting place (address) of work:       (postal code)       (address) | Will you work on various premises of the employer (located in different counties)?       [ ] yes [ ] no  |
| **12. 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 [ ]  noIf yes, previous Hungarian employer’s name and address:       |
| **INFORMATION NOTICE*****During the procedure, the immigration authority may request the submission of further documents for clarification of facts of the case.*** |