



BEVÁNDORLÁSI ÉS
ÁLLAMPOLGÁRSÁGI
HIVATAL



Application for residence permit for the purpose of study

Authority receiving the application:		File number: _ _ _ _ _ _ _ _ _ _	
Office recording the data included in the application:		<div style="border: 1px solid black; width: 150px; height: 150px; margin: 0 auto;">Photo</div>	
<input type="checkbox"/> Residence permit issued for the first time			
Place of entry:			
Date of entry: Year Month Day			
Number and expiry date of residence visa H □□□□□□□□ Year Month Day			
<input type="checkbox"/> Renewal of the residence permit		<div style="border: 1px solid black; width: 400px; height: 60px; margin: 0 auto;"></div> <p>[Specimen signature of the applicant (legal representative)] Please ensure your signature fits within the box.</p>	
Number and expiry date of residence visa H □□□□□□□□ Year Month Day			
Place of receipt of the document: <input type="checkbox"/> Applicant will receive the document at the issuing authority. <input type="checkbox"/> Applicant will receive the document by postal mail.			
1. Applicant's personal data			
Family name (as per passport):		Given name (as per passport):	
Family name at birth:		Given name at birth:	
Mother's family and given name at birth:		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Marital status: <input type="checkbox"/> single <input type="checkbox"/> married <input type="checkbox"/> widow <input type="checkbox"/> divorced
Date of birth: Year Month Day	Place of birth (city):		Country:
Citizenship:		Nationality (optional):	

Last permanent residence abroad:		
Qualification:	Highest level of education: <input type="checkbox"/> primary <input type="checkbox"/> secondary <input type="checkbox"/> higher education	Occupation prior to arriving in Hungary:

2. Applicant's passport data	
Passport number:	Place and date of issue: Year Month Day
Type of passport: <input type="checkbox"/> private <input type="checkbox"/> official <input type="checkbox"/> diplomatic <input type="checkbox"/> other	date of expiry: Year Month Day

3. Planned period and purpose of residence	
For what period and what purpose are you applying for residence permit? □□□□ Year □□ Month □□ Day	

4. Data of the applicant's residence in Hungary					
ZIP code:	City/Town:			Name of public space:	
Type of public space:	House number:	Building:	Staircase:	Floor:	Door:
Legal title of residence: <input type="checkbox"/> owner <input type="checkbox"/> tenant <input type="checkbox"/> family member <input type="checkbox"/> by courtesy of the owner <input type="checkbox"/> other (please specify):					

5. Data of host educational institution	
Name:	Type of education: <input type="checkbox"/> secondary education <input type="checkbox"/> bachelor <input type="checkbox"/> master <input type="checkbox"/> other training
Seat:	

6. Data of costs of living in Hungary	
Monthly amount of scholarship:	Available savings:
Any additional income/asset:	

7. Conditions of return or onward travel					
Which country do you wish to return to or travel onward after the legal residence?				What means of transport do you want to use?	
Do you have the necessary	passport?	visa?	ticket?	financial means?	
	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> yes, and the sum is:	<input type="checkbox"/> no

8. Spouse, child, parent of the applicant in Hungary

Name/Relationship:	Place and date of birth:	Citizenship:	Legal title of residence: <input type="checkbox"/> visa <input type="checkbox"/> residence permit <input type="checkbox"/> temporary residence permit <input type="checkbox"/> EC permanent residence permit <input type="checkbox"/> other <input type="checkbox"/> residence visa <input type="checkbox"/> permanent residence permit <input type="checkbox"/> national permanent residence permit <input type="checkbox"/> immigration permit <input type="checkbox"/> EU Blue Card
Name/Relationship:	Place and date of birth:	Citizenship:	Legal title of residence: <input type="checkbox"/> visa <input type="checkbox"/> residence permit <input type="checkbox"/> temporary residence permit <input type="checkbox"/> EC permanent residence permit <input type="checkbox"/> other <input type="checkbox"/> residence visa <input type="checkbox"/> permanent residence permit <input type="checkbox"/> national permanent residence permit <input type="checkbox"/> immigration permit <input type="checkbox"/> EU Blue Card
Name/Relationship:	Place and date of birth:	Citizenship:	Legal title of residence: <input type="checkbox"/> visa <input type="checkbox"/> residence permit <input type="checkbox"/> temporary residence permit <input type="checkbox"/> EC permanent residence permit <input type="checkbox"/> other <input type="checkbox"/> residence visa <input type="checkbox"/> permanent residence permit <input type="checkbox"/> national permanent residence permit <input type="checkbox"/> immigration permit <input type="checkbox"/> EU Blue Card

9. Other data

Are you covered by full health insurance for the period of your stay in Hungary?
 yes no

Has your application for residence permit ever been refused?
 yes no

Have you ever been convicted for a crime? If yes, please specify the country, date, the type of crime committed and the type of punishment imposed?
 yes no

Have you ever been expelled from Hungary? If yes, please specify the date.
 yes no

..... Year Month Day

To the best of your knowledge, do you suffer from HIV/AIDS, hepatitis B, tuberculosis, syphilis, leprosy, typhoid diseases, which need treatment, or are you a carrier of HIV, hepatitis B, typhoid or paratyphoid?
 yes no

If you suffer from any of the above diseases, or you are contagious with or a carrier of them, do you receive compulsory and regular medical treatment?
 yes no

Permanent or habitual residence prior to arrival to Hungary:
 Country:
 City/Town:
 Name of public space:

What country do you wish to return to or travel onward after the expiry of your legal stay?
 Country:

I confirm that the above information is true and correct. I acknowledge that giving false information shall result in the rejection of my application.

Dated:
 Signature

Duty stamp:

For official use only!

In case the application is approved

I allow the applicant to stay in Hungary for the purpose of
until ____ Year ____ Month ____ Day.

Dated:
.....
(Signature, seal)

Number of the residence permit issued:

I have received the residence permit.

Dated:
.....
(Applicant's signature)

In case of renewal, the number of the residence permit revoked:

In case the application is rejected

Number of rejecting decision:

Date of rejection: ____ Year ____ Month ____ Day

Reasons for rejection (briefly):

INFORMATION

The application for residence permit can be submitted in person, not later than 30 days before the expiry of legal stay, at the regional directorate competent over the accommodation, together with all relevant documents. One passport photo has to be attached to the application form. The applicant must present his/her valid passport when submitting the application form. The passport must be valid for the duration of the residence permitted.

Annexes to be attached to the application form:

- **document certifying the purpose of residence**
 - = admission certificate issued by the educational institution
 - = document certifying student status
- **document certifying the legal title of residence**
 - = certificate of accommodation of dormitory
 - = certified copy of title deed in the case of own property
 - = tenancy agreement
 - = document certifying courtesy utilisation of the flat
 - = other document
- **document certifying financial background**
 - = certificate of scholarship disbursements
 - = bank certificate
 - = other document
- **document certifying full health insurance**

The aliens policy authority has the right to ask for any further document during the process in order to clarify the circumstances!

When applying for the renewal of the residence permit, if the conditions that have served as basis for issuing the residence permit are unchanged, the applicant does not have to attach the documents certifying these circumstances again

The applicant can ask the proceeding aliens policy authority to obtain the certificate concerning the data indicated by the applicant from another competent authority. This part of the application is considered as an approval to manage and forward your personal data. If the aliens policy authority obtains the necessary data, the applicant has to pay the related service fees to the aliens policy authority.