

National Directorate-General for Aliens Policing Országos Idegenrendészeti Főigazgatóság



APPENDIX (White Card)

PLEASE COMP	LETE THE FORM LEGIBLY,	IN LATIN	BLOCK LETTERS.	
1. Particulars of the employment rela	tionship verified in a country o	utside of H	ungary:	
name of the employer:				
place of establishment (i.e. registered ac	ldress) / address:			
The employer's scope(s) of activity:	Position:		Duration of work that may be performed electronically, as remote work:	
Income for the 6 months immediately papplication:	eceding the submission of the Other ad subsister		ditional income/properties or assets as means case:	of
2. Particulars of the business with a ve	rified profit in a country outsid	le of Hunga	ry:	
name of the business:				
place of establishment (i.e. registered ad	dress) / address:			
The employer's scope(s) of activity:	Date of the establishment of the business: Ownership ratio:		Position in the business: Member relationship Executive relationship Other, specifically:	
	Number of persons with owr share:	nership		
Income for the 6 months immediately preceding the submission of the application:			ditional income/properties or assets as subsistence:	

3. Professional qualification(s):	4. 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	5. The applicant's activity to be performed in Hungary on the basis of the position held in a(n) employment relationship/business:		
INFORMATION NOTICE During the procedure, the immigration authority may request the submission of further documents for clarification of facts of the case.				