

ON-LINE VISA APPLICATION FORM

20002-35234575 \ 15.07.2019 11:06:33
Visa Application Center VHS
(Budapest)

1. Nationality (if you formerly had USSR or Russian citizenship, please indicate when and why you lost it).

HUNGARY

2. Surname (as in passport).

KALABAY

3. First name, other names, patronimic (as in passport).

MARTON KRISTOF

4. Date of birth (dd/mm/yyyy).

20/06/1997

5. Sex.

MALE

6. Passport.

Passport No: BH5140510
Date of issue: 16/06/2016
valid until: 16/06/2026

7. Purpose of visit.

SCIENTIFIC-TECHNICAL RELATIONS

8. Category and type of visa.

COMMON HUMANITARIAN

9. Number of entries.

SINGLE

10. Date of arrival and departure.

22/07/2019 - 01/08/2019

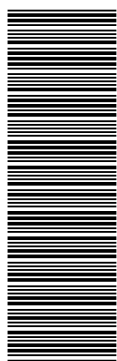
11. Host organisation you intend to visit.

Company name: PEAPLES FRIENDSHIP UNIVERSITY OF RUSSIA
TIN: NONE
Invitation No: NONE
Directive No: NONE
Address: MOSCOW, RUSSIA

12. Route of journey (destination points).

MOSCOW

Photograph and signature.

Place for
photograph

Date (dd/mm/yyyy), personal signature

Service information (automatically generated).

Application form recipient: Visa Application Center VHS
(Budapest)

Basis (voucher, dir. No, inv. No): NONE

The estimated date of visit to the RC:

Application No (web-site): 35234575

The date of processing: 7/15/2019

Application No (VAC):

The date of processing by the VAC:

Request No in Russian Consulate (RC):

I hereby agree to the processing and transfer of my personal data in electronic form for the purposes of making a decision on visa issuance. I declare that data provided in the application form are full and correct. I am aware that any false information may be a cause for the denial of visa or for the cancellation of the previously issued visa and may lead to other consequences provided for by the legislation of the Russian Federation. Subject to the receipt of visa, I pledge to leave the territory of the Russian Federation before the visa expiration date. I am aware that valid visa does not automatically allow to enter the territory of the Russian Federation. In case of denial of entry, I will not seek any compensation for potential losses.

13. Children under 16 years and other relatives written in your passport.	
Do you travel with children under 16 years or other relatives written in your passport?	NO
14. Your permanent address, telephone number, fax number, E-mail.	1113 BUDAPEST BOCSKAI UT 40, TEL: 06202942726
15. Current/latest place of work.	SEMMELWEIS EGYETEM, HALLGATO, 1085 BP ULLOI UT 26, TEL: 0614591500
16. Information about your previous trips to Russia.	
How many times have you been to Russia?	-
17. Information about health insurance.	
Do you have health insurance that is valid in Russia?	YES
Name of the insurance company, insurance number:	AEGON
18. Other names used in the past (maiden, pen-name, religious, etc.).	NONE
19. Your place of birth (if you were born in Russia, please specify when and which country you emigrated to).	BUDAPEST
20. Additional information about your relatives.	
Do you currently have relatives in Russia?	NO