



República de Moçambique

Ministério da Educação e Cultura
INSTITUTO DE BOLSAS DE ESTUDO, IP

COMUNICADO Nº 12/2025

**INFORMAÇÃO SOBRE O BENEFÍCIO DA BOLSA DE ESTUDO E DOCUMENTOS
NECESSÁRIO PARA O TRATAMENTO DO VISTO PARA
HUNGRIA**

Na sequência dos resultados divulgados através do comunicado nº 09/2025, datado de 16 de Junho de 2025, no contexto do Memorando de Entendimento assinado entre o Governo da República de Moçambique e da Hungria, em diversas áreas de conhecimento, ao abrigo do Programa de Bolsas de Estudo *Stipendium Hungaricum*, para o ano académico 2025/2026, o IBE, IP vem através desta, comunicar aos estudantes apurados o seguinte:

1. Benefícios da bolsa de estudo:

1.1 Parte húngara:

- a) Isenção de taxas de propinas;
- b) Isenção de taxas de alojamento ou no campus da instituição de ensino que acolhe ou contribui para as despesas de alojamento, tal como estipulado pelos regulamentos legais da Hungria;
- c) Direito aos serviços de saúde;
- d) Subsídio de subsistência mensal de acordo com a regulamentação das bolsas de estudo, para estudantes estrangeiros;
- e) Alimentação; e
- f) Isenção de taxas de visto.

1.2 A Parte Moçambicana:

- a) Passagem aérea de ida e regresso a África do Sul para o tratamento de visto;
- b) Subsídio de deslocação a África do Sul, no valor de USD 130,00 (cento e trinta dólares americanos) diários, durante o período de permanência na África do Sul, para o tratamento de visto; e

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c) Passagens aérea de ida para a Hungria e regresso definitivo.

1.3 Documentos necessários para o visto, pode-se consultar a informação em anexo.

Nota:

- em relação as datas para a deslocação a África do Sul, está sendo feita a coordenação com a parte húngara e, brevemente será comunicado aos estudantes abrangidos;
- os estudantes devem verificar se preencheram os requisitos para o pedido de alojamento na Hungria; e
- os estudantes devem verificar se preencheram o formulário de permissão de residência na Hungria (conforme o modelo em anexo).

Maputo, 08 de Maio de 2025



Carla Maria Elias Caonha
(Assistente Universitária)

The list of the documents required to bring by the applicants:

- visa form and appendix to be filled,
- 1 passport size colour picture (white background),
- valid passport with at least 2 blank pages for the visa,
- copy of the passport and the ID
- letter of award,
- letter of acceptance,
- certificate of graduation (copy, translated if it is not in English),
- health declaration and copy of the so called yellow book (which proves that the applicant is being vaccinated)
- airplane ticket(s) booking (return or one way),
- additional supporting documents which help the IFR to decide the case.

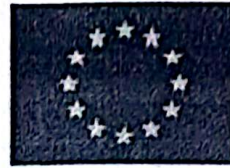
However, the Hungarian government guarantees accommodation, 3 times meal, some pocket money and health care (insurance) for the student some additional documents according to the financial surroundings of the applicant's family are very much appreciated. For example a declaration in front of the attesting notary of the parents which proves the financial support of the parents, for example an extract of the parent's bank account (last 3 months),

- traveling insurance (just for the travelling time by airplane) is not obligatory.

The visa is free of charge



National Directorate-General for
Aliens Policing
Országos Idegenrendészeti
Főigazgatóság



Application form for a residence permit

For completion by the authority.	
The authority receiving the application: _____	
Date of receipt of the application: _____ year _____ month _____ day	
	<div style="border: 1px solid black; width: 150px; height: 150px; margin: 20px auto; text-align: center;">Area designated for the placement of a facial photograph</div>
	<div style="border: 1px solid black; width: 300px; height: 40px; margin: 20px auto;"></div>
	[Handwritten signature specimen of the applicant (legal representative)]
The signature must be inside the box in its entirety.	
PLEASE COMPLETE THE FORM LEGIBLY, IN LATIN BLOCK LETTERS.	
<input type="checkbox"/> First time issuance of a residence permit: Border crossing point as place of entry, date of entry: _____, _____ year month day	
<input type="checkbox"/> Extension of a residence permit: Document number of the residence permit, date of expiry: _____, _____ year month day	
Telephone number:	Email address:
Delivery of the document (in case the application is submitted by the applicant, unless the application is for a residence permit for the purpose of training or for a residence permit for the purpose of studies):	
<input type="checkbox"/> The applicant requests delivery of the document by way of post. Postal delivery address: <input type="checkbox"/> place of accommodation of the applicant <input type="checkbox"/> contact address of the attorney-in-fact	

			permit <input type="checkbox"/> EC permanent residence permit <input type="checkbox"/> interim residence card <input type="checkbox"/> EU residence card <input type="checkbox"/> national residence card <input type="checkbox"/> other, specifically:	<input type="checkbox"/> immigration permit <input type="checkbox"/> EU Blue Card Residence document number: <input type="checkbox"/> does not reside in Hungary
name/degree of relationship:	place and date of birth:	citizenship:	legal title of residence: <input type="checkbox"/> visa <input type="checkbox"/> residence permit <input type="checkbox"/> interim permanent residence permit <input type="checkbox"/> EC permanent residence permit <input type="checkbox"/> interim residence card <input type="checkbox"/> EU residence card <input type="checkbox"/> national residence card <input type="checkbox"/> other, specifically:	<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 Residence document number: <input type="checkbox"/> does not reside in Hungary
name/degree of relationship:	place and date of birth:	citizenship:	legal title of residence: <input type="checkbox"/> visa <input type="checkbox"/> residence permit <input type="checkbox"/> interim permanent residence permit <input type="checkbox"/> EC permanent residence permit <input type="checkbox"/> interim residence card <input type="checkbox"/> EU residence card <input type="checkbox"/> national residence card <input type="checkbox"/> other, specifically:	<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 Residence document number: <input type="checkbox"/> does not reside in Hungary
name/degree of relationship:	place and date of birth:	citizenship:	legal title of residence: <input type="checkbox"/> visa <input type="checkbox"/> residence permit <input type="checkbox"/> interim permanent residence permit <input type="checkbox"/> EC permanent residence permit <input type="checkbox"/> interim residence card <input type="checkbox"/> EU residence card <input type="checkbox"/> national residence card <input type="checkbox"/> other, specifically:	<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 Residence document number: <input type="checkbox"/> does not reside in Hungary

7. Other details

Permanent or habitual place of residence (prior to your arrival in Hungary):

Country: Locality: Name of the public place:

Are you a holder of a valid residence permit document in another Schengen Member State? ☐ yes ☐ no

type and number of the permit:

date of expiry: year month day

Have you ever had a rejected application for a residence permit before?
☐ yes ☐ no

Have you ever been sentenced for a crime before? If yes, in which country and when, for what crime, and what was your punishment,
 sentence?
☐ yes ☐ no

12. I undertake to leave the territory of the Member States of the European Union and other Schengen States within 8 days of the date on which my residence permit ceases to be valid.

In this context, I declare that I am going to undertake voluntary departure and fulfil my obligation to leave to _____ as a country which is considered a safe country of origin or a safe third country for me, where I will not be at risk of persecution on grounds of race, religion, nationality, membership of a particular social group or political opinion, or as defined in Article XIV(3) of the Fundamental Law of Hungary.

The country of expulsion is:

- ☐ a state where I have my habitual place of residence and that I am allowed to enter with the following permit:
type and number of the permit: _____
- ☐ the/a state of my citizenship,
- ☐ a state that I am allowed to enter with the following permit:
type and number of the permit: _____

It is known to me that if I do not comply with the provisions of the decision of expulsion by the deadline specified in the decision, the immigration authority will carry out the expulsion under law enforcement escort and impose a ban on my entry and stay.

Date: _____

Signature: _____

Transaction number of payment if made by an electronic payment instrument or by a bank deposit: _____

For completion by the authority.

If the application is approved

I hereby approve the applicant's residence in Hungary for the purpose of _____ until _____ year _____
month _____ day.

Date: _____

Signature, stamp: _____

Document number of the residence permit issued and handed over: _____

I received the residence permit.

Date: _____

Signature of the applicant: _____

In case of extension, the document number of the residence permit withdrawn: _____

If the application is refused

Number of the resolution on refusal: _____

Date of the refusal: _____ year _____ month _____ day

Legal basis of the refusal: _____

If the procedure is terminated

The number of the decision of termination: _____

Date of the decision: _____ year _____ month _____ day

Legal basis of the decision: _____

	a scholarship? <input type="checkbox"/> yes <input type="checkbox"/> no
Name of the scholarship providing for the applicant's means of subsistence: amount:	
Do you have any savings? <input type="checkbox"/> yes <input type="checkbox"/> no Amount:	
Other additional income/properties or assets as means of subsistence:	
INFORMATION NOTICE <i>During the procedure, the immigration authority may request the submission of further documents for clarification of facts of the case.</i>	