	Official stamp of the authority:
Application form for immediate financial assistance under Act CXXXV of 2005 on assistance to victims of crime and state compensation	
	MEDIATE FINANCIAL ASSISTANCE ELATING TO THE CRIMINAL OFFENCE AND

MISDEMEANOUR AGAINST PROPERTY

I. Personal data of the applicant		
Name:		
Birth name:		
Place and date of birth:		
Mother's birth name:		
Type and number of identity document:		
Permanent address:		
Temporary address:		
Contact details: Landline telephone*: Mobile phone*: E-mail address*:		
Nationality:		
For non-Hungarian applicants, the title of residence in Hungary:		
II. Data relating to the criminal offence serving as the basis for the application, as well as the misdemeanour against property and the harm suffered as its direct consequence		
The place where the offence/ misdemeanour against property was committed:		
Date of the offence/ misdemeanour against property: year month day		
Harm suffered by the applicant: physical injury: psychological trauma, emotional distress: property damage: other:		
III. Data regarding the requested assistance		
Every victim is entitled to assistance from the victim support service in resolving legal, social, child protection, healthcare, social security, employment, or any other issues arising from the criminal offence/misdemeanour against property (assertion of interest). Furthermore, the victim is entitled to have the victim support service assist them in resolving legal matters related to the criminal offence or misdemeanour against property. In cases of need, the victim support service facilitates access to legal aid by providing a certificate of victim status.		
Requested assistance: □ immediate financial assistance		

purpose:	
□□ housing-related expenses	□□ clothing-related expenses
□□ food-related expenses	□□ travel-related expenses
□□ medical expenses	□□ funeral expenses
reason, description of the crisis situation:	
	and the second s
cover due to the criminal offence/misdemeanour aga	ed for extraordinary expenses that the victim is unable to ainst property.
Payment method for financial assistance:	
□ cash payment	
□ postal money order (address:)
□ transfer to a personal bank account:	
(Bank name:account number:)	
•	ces (title, number)
1.	tes (title, fluitiber)
2.	
3.	
V. C	Declarations
I declare that I am / am not subject to any repaym or legal aid fees.	ent obligations for previously received financial victim support
	usly received financial support for the same criminal
offence/misdemeanour against property under the	
3. I declare that I am / am not subject to any disqualit of review procedures.	fication from assistance due to false statements or obstruction
•	e victim support service at my request, in my presence. Yes /
5. Other remarks:	
declare under criminal liability that the statements I h	ave made are true and accurate.
	sents to the processing of the provided data by the e Ministry of Justice for the purpose of assessing and extent necessary.
Date: year moı	nth day.
	signature of applicant
	signature of applicant