

Data Request Form Remote execution

Please indicate the type of research!

Research with institutional background

Research without institutional background

Please note that HCSO publishes the official full name of the Institution (in case of research with institutional background) or the name of the signatory (in case of research without institutional background) for approved research proposals on the website of the HCSO!

***In case of research with institutional background:** copy of the charter of the Institution and the copy of the organisation chart of the Institution are to be attached to this completed data request form!*

***In case of research without institutional background:** for Part I. ‘Personal information’, please fill in “I.3. Information on researcher(s)” only and leave parts I.1 and I.2 blank!*

Please also note that due to the nature of the remote execution data access channel, the specification of the research must be sent to the HCSO. Therefore please attach the specification to this completed data request form!

I. Personal information

I.1 Basic information on the institutional background (hereinafter: Institution)

I.1.1 Name and legal status of the Institution

Full official name of the Institution:

Legal status of the Institution:

I.1.2 **Contact information** of the Institution

Registered address of the Institution:

Tax number of the Institution:

Bank account number of the Institution:

Postal address of the Institution:

Central e-mail address of the Institution:

Telephone number of the Institution:

I.1.3 Information on the **official representative of the Institution**

Name of the official representative of the Institution:

Position of the official representative of the Institution:

Postal address of the official representative of the Institution:

E-mail address of the official representative of the Institution:

Telephone number of the official representative of the Institution:

I.2 Information on the activity of the Institution

Please briefly describe the **activity of the Institution** (both its main activity and other activities)!

Please indicate if the Institution has a **supervisory, governing body** and if so, please briefly **describe the nature of the supervision, governance!**

Please briefly describe the **place and role of research activity in the Institution** (only if research is not the main activity of the Institution)!

Please **indicate the 5 most important research projects** in which the Institution took **part in the last 5 years** and please **also list 5 additional research projects**, in which the Institution participated, regardless of the time of publication!

Please describe the **rules and procedures of publication of scientific results** in the Institution!

Please describe the **arrangements of financing** of the Institution (e.g. direct or indirect financial sources used; joined with other institutions or companies based on contract, etc.), with special attention given to the research activity!

I.3 Information on the researcher(s)

Please give the following information on each researcher having remote execution in the framework of the research!

*Please note that with this complete data request form, **full professional curriculum vitae with details of all completed or currently ongoing research activities of all researchers must be attached!***

Please also indicate the contact person for this research project!

1. Information on the researcher

Prefix (Mr., Mrs., Ms., Prof., etc.):	Surname:	First name:	Number of photographic ID card:
Date of birth:		Permanent address:	
Position (Ph.D. student, institutional researcher, etc.):		Telephone number:	
E-mail address:		Contact person? Yes No	
<p>Please select your type of legal relationship with the Institution listed under item 1.1 (please also indicate if the relationship is fixed-term or indefinite-term)!</p> <p>Employment: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Civil service relationship: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Public service relationship: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Agency contract</p> <p>Business contract</p> <p>Other, please indicate:</p>			

2. Information on the researcher

Prefix (Mr., Mrs., Ms., Prof., etc.):	Surname:	First name:	Number of photographic ID card:
Date of birth:		Permanent address:	
Position (Ph.D. student, institutional researcher, etc.):		Telephone number:	

E-mail address:	Contact person?	
	Yes	No
<p>Please select your type of legal relationship with the Institution listed under item 1.1 (please also indicate if the relationship is fixed-term or indefinite-term)!</p> <p>Employment: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Civil service relationship: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Public service relationship: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Agency contract</p> <p>Business contract</p> <p>Other, please indicate:</p>		

3. Information on the researcher

Prefix (Mr., Mrs., Ms., Prof., etc.):	Surname:	First name:	Number of photographic ID card:
Date of birth:		Permanent address:	
Position (Ph.D. student, institutional researcher, etc.):		Telephone number:	
E-mail address:	Contact person?		
	Yes		No
<p>Please select your type of legal relationship with the Institution listed under item 1.1 (please also indicate if the relationship is fixed-term or indefinite-term)!</p> <p>Employment: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Civil service relationship: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Public service relationship: <input type="checkbox"/> fixed-term <input type="checkbox"/> indefinite-term</p> <p>Agency contract</p> <p>Business contract</p> <p>Other, please indicate:</p>			

II. Information on the scientific purpose and the professional content of the research proposal

II.1 Basic information on the research project

Please indicate the **title of the research project!**

Please indicate the **topic of the research project!**

Please note that HCSO publishes this information on its website if the data request is approved!

Please select the **aim of the research** (multiple choice)!

- Thesis / Dissertation Doctoral dissertation EU grant
- National grant, research (OTKA, OFA, TÁMOP, etc.)
- Other, please specify:

II.2 Information on the scientific purpose

Please briefly describe the **main purpose of the research project, with special attention given to the benefit for economy, society or nature as a whole!**

Please describe **why remote execution is necessary for the fulfilment of the intended research** and why the research project cannot be fulfilled **using data available via different data access channels!**

Please **indicate the dataset(s) to be accessed in remote execution environment!**

Please describe the requested dataset(s) (content and reference time of the dataset(s))!

Do you wish to bring in **external dataset(s)** into the remote execution environment for the research?

Yes

No

If *yes* then please **list the external dataset(s) and briefly describe their content!**

Please list the **statistical methods** to be used during the research!

Please select the expected **lowest level of geographical breakdown to be used in the intended publication!**

Contry-part of the country

Statistical regions

Counties, capital

Subregions

Settlements

No geographical breakdown is used in the publication

Other, please indicate:

Please briefly describe **the intended modes of publication of the research outputs produced in the remote execution environment!**

Please indicate **how many times you request outputs to be taken out from the remote execution environment!**

Please note that the HCSO charges for each output checking procedure!

Once

2-3 times

More times, especially:

Research calendar

Please indicate the expected schedule of the research (start date, expected time of producing research outputs, main milestones of the research, finish date, etc.)!

*Please bear in mind that the **maximum duration of a research project is 5 years!** Please indicate the start and finish dates of the research project in YYYY/MM/DD format!*

Please indicate **the expected date and format** of publishing research outputs!

Please list **any additional comments** on the research proposal here!

Place, date:

I hereby acknowledge with my signature that the above given information corresponds to the facts:

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Person requesting the data¹

¹ For research with institutional background: representative of the Institution.