APPLICATION

… University … Faculty ... Department

to fill the position of university professor

(Application ID:…)

NAME

Dated …………………………

TABLE OF CONTENTS

[CALL FOR APPLICATIONS 3](#_Toc193223839)

[APPLICANT'S RESPONSE TO THE CALL 4](#_Toc193223840)

[SHORT CURRICULUM VITAE 5](#_Toc193223841)

[I. HIGHER EDUCATION ACTIVITIES 6](#_Toc193223842)

[1a.1. Teaching experience 6](#_Toc193223843)

[1a.2. Leading the academic and scientific work of students 6](#_Toc193223844)

[1a.3. Lectures, practice sessions and seminars delivered in a foreign language at graduate and/or postgraduate level or at any level of learning in the Bologna system. 7](#_Toc193223845)

[1b. Activities and achievements in education development 7](#_Toc193223846)

[1b.1. 7](#_Toc193223847)

[1b.2. 7](#_Toc193223848)

[II SCIENTIFIC ACTIVITIES 8](#_Toc193223849)

[2a.1. Outstanding scientific or research work 8](#_Toc193223850)

[2a.2. Supervising the scientific work of young academics, participation in doctoral training as a thesis supervisor 9](#_Toc193223851)

[2b.1. Experience and achievements in research management 9](#_Toc193223852)

[2b.2. Recognition in Hungary and abroad 10](#_Toc193223853)

[III PLANS RELATING TO THE PERFORMANCE OF TASKS 11](#_Toc193223854)

[IV ANNEXES 12](#_Toc193223855)

# CALL FOR APPLICATIONS

Presentation of the published call for applications. (This requirement does not apply to applications submitted by the Hungarian Academy of Sciences, the Hungarian Academy of Arts, the Hungarian Olympic Committee and by private higher education institutions and faith-training institutions. In these cases, presentation is recommended but not required.)

# APPLICANT'S RESPONSE TO THE CALL

The Applicant's letter containing a statement on submitting an application under a given call for applications. (This requirement does not apply to applications submitted by the Hungarian Academy of Sciences, the Hungarian Academy of Arts, the Hungarian Olympic Committee and by private higher education institutions and faith-training institutions. In these cases, presentation is recommended but not required.)

signature

# SHORT CURRICULUM VITAE

Format: normal margins (bottom, top, left and right margins 2.5 cm), Times New Roman font, size 12, single line spacing, maximum number of pages: 5 pages.

signature

# I. HIGHER EDUCATION ACTIVITIES

Format: normal margins (bottom, top, left and right margins 2.5 cm), Times New Roman font, size 12, single line spacing, maximum number of pages to describe I. Higher education activity: 30 pages.

## 1a.1. Teaching experience

*Detailed* presentation based on the Evaluation Sheet and the Guide.

Total number of contact hours:..., of which lectures ... . Online classes can also be taken into account in the presentation of higher education teaching activities. Duration of each contact hour: minimum forty-five minutes, maximum sixty minutes.

If several institutions certify the teaching activity, it is recommended to present the total number of contact hours in the application as well.

For subjects taught in the five active years preceding the submission of the application, the student feedback is included in the documentation proving the teaching activities. In the case of subjects where the student feedback was not prepared or the result was not representative, the assessment of the direct supervisor of the Applicant's teaching activity attached, including the name of the courses taught which the direct supervisor's assessment relates to.

The Applicant's participation in examinations must be presented and certified by their direct superior.

## 1a.2. Leading the academic and scientific work of students

*Detailed* presentation based on the Evaluation Sheet and the Guide.

Presentation of theses/dissertations:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| No. | Name | Name of scientific field | Title of thesis/dissertation | Year of defence |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Presentation of TDK/OTDK lectures/theses:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No. | Name | Name of scientific field | Title of TDK lecture/thesis | Year | Placements | |
| TDK | OTDK |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

## 1a.3. Lectures, practice sessions and seminars delivered in a foreign language at graduate and/or postgraduate level or at any level of learning in the Bologna system.

*Detailed* presentation based on the Evaluation Sheet and the Guide.

If the Applicant presents foreign guest teaching activities, a certification issued by the direct superior must be provided, including details of the contact hours delivered (name of the course(s) taught, number of hours, and information about the higher education institution).

## 1b. Activities and achievements in education development

## 1b.1.

*Detailed* presentation based on the Evaluation Sheet and the Guide.

Presentation of subject director responsibilities:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | (academic year / semester) | Subject Name | Type of subject (mandatory A/optional B/C) | Name and level of specialisation (study programme/ specialisation) | Language of training |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

## 1b.2.

*Detailed* presentation based on the Evaluation Sheet and the Guide.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Title of coursebook (with page number) | Title of textbook (with page number) | Title of the teaching aid (with page number) | Digital teaching materials | Editor /sole author / first author / indicating % for multiple authors |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

# II SCIENTIFIC ACTIVITIES

Format: normal margins (bottom, top, left and right margins 2.5 cm), Times New Roman font, size 12, single line spacing, maximum number of pages to present II. Scientific activities: 30 pages.

## 2a.1. Outstanding scientific or research work

*Detailed* presentation based on the Evaluation sheet and the Guide (except for Applicants who have obtained a Hungarian Academy of Sciences doctorate within ten years).

List of Q1 publications in a foreign language in the Applicant's field of expertise, of which the Applicant is the sole, first or lead (corresponding or final) author of at least one:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Title | Authors | Journal | | No. of independent citations |
| Name | Ranking in the year of publication  (e.g. Q1) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Additional Q1 publications:

1. …
2. …

etc.

The Applicant meets the independent citation value and the requirements for the independent citation parameter set out in the Evaluation Sheet as follows:

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| No. | Title | Author(s) | Author status of the Applicant (sole/first/last/correspondent) | Journal | | n  (citation index) | Number of independent citations  (Cit.) |
| Name | Ranking in the year of publication  (e.g. Q1) |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

At least two Q1 publications in a foreign language, published in the Applicant's field of expertise, along with articles meeting the minimum independent citation parameters, must be uploaded as in full-length versions to the TIR 2.0 database as separate PDF files (this requirement applies even to Applicants who obtained the title of Doctor of the Hungarian Academy of Sciences within the last ten years).

## 2a.2. Supervising the scientific work of young academics, participation in doctoral training as a thesis supervisor

*Detailed* presentation based on the Evaluation Sheet and the Guide.

Presentation of the student(s) who have obtained a doctoral degree supervised by the Applicant:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Name | Title of doctoral dissertation | Year of defence | Name of doctoral school, name of programme | Role of the Applicant (supervisor/co-supervisor… %) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Description of the student(s) supervised by the Applicant:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| No. | Name | Title of doctoral dissertation | Expected year of dissertation defence | Name of doctoral school, name of programme | Role of the Applicant (supervisor/co-supervisor… %) |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

The PhD student(s) listed in the application are recorded in the doktori.hu database. In the case of student(s) who cannot be recorded in the doktori.hu database (e.g. because they have a foreign supervisor), a certificate from their supervisor is attached.

## 2b.1. Experience and achievements in research management

*Detailed* presentation based on the Evaluation Sheet and the Guide.

Role of the Applicant in applications:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No. | Application | | | | | Role of the Applicant  (supervisor, research fellow, etc.) |
| Publisher of the call and its identifier | Title | Year | | Amount granted (HUF/EUR) |
| Start date | End date |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

## 2b.2. Recognition in Hungary and abroad

*Detailed* presentation based on the Evaluation Sheet and the Guide.

# III PLANS RELATING TO THE PERFORMANCE OF TASKS

(optional, recommended)

Format: normal margins (bottom, top, left and right margins 2.5 cm), Times New Roman font, size 12, single line spacing, maximum number of pages to present the plans related to the III Performance of the Tasks: 3 pages.

# IV ANNEXES

Annexes according to V.3 Checklist and formal requirements of the Guide:

|  |
| --- |
| Annexes related to educational activities: |
| To certify educational activities, a summary table of contact hours should be provided, including the required data as specified in the sample document available on the MAB website, or a certification based on data recorded in the Neptun database, authenticated by the rector. |
| To certify educational activities performed in a foreign language, a summary table should be provided, including the required data as specified in the sample document available on the MAB website, or a certification based on data recorded in the Neptun database, authenticated by the rector. |
| In the case of subjects where the student feedback was not prepared or the result was not representative, the assessment and certification of the direct superior of the Applicant's teaching activity, including the name of the courses taught which the direct supervisor's assessment relates to. |
| If the Applicant presents foreign guest teaching activities, a certification issued by the direct superior must be provided, including details of the contact hours delivered (name of the course(s) taught, number of hours, and information about the higher education institution). |
| Certification by the workplace supervisor regarding the Applicant's subject director assignments over the past ten active years, including the academic year/semester, subject name and type, training programme (field/specialization), training level, and the language of instruction. |
| *Exclusively in the field of Medicine and Health Sciences (except Sports Science):* evidence of participation in examinations, certified by the direct superior. |
| Annexes related to scientific activities: |
| A certificate from the central library of the submitting institution attesting to the authenticity of the scientific metrics. |
| Summary table downloaded from MTMT database. |
| Discipline-specific table downloaded from MTMT database. |
| A list of ten key publications: five publications considered to be the most important of the Applicant's entire scientific career at the time of submitting the application, plus five additional publications considered to be the most important among the works published in the five active years preceding the submission of the application. |
| If the database of the National Doctoral Council (doktori.hu) does not confirm the existence of the student(s) who have obtained a degree under the Applicant's supervision, a certificate from the Applicant's direct superior is required (e.g. in the case of PhD students who have obtained a degree abroad). The data in the application and in the doktori.hu database must be consistent. |
| If the Applicant submits a publication accepted for publication, its details must be available in the MTMT and a copy of the publisher's acceptance letter must be attached. |
| *Exclusively in the field of Medicine and Health Sciences (except Sports Sciences):* List of papers that meet the minimum independent citation value. |
| Signed declarations: |
| The Applicant's declaration regarding discipline(s) (selection of one, or up to three disciplines from the table in Guideline section V.1.1, with the declaration made according to section V.2 of the Guideline). |
| The Applicant’s statement of consent to the processing, retention and lawful disclosure of personal data (as described in point V.4 of the Guideline). |
| Certified personal documents |
| Document certifying the acquisition of a doctoral degree or scientific title (if the latter is available). In the case of a degree obtained abroad, the certificate of naturalization,[[1]](#footnote-1)  or  a legally recognised artistic award equivalent to a doctorate and at least a bachelor's degree[[2]](#footnote-2) (in the case of qualifications obtained abroad, a certificate of recognition of the diploma in Hungary),  or  a legally recognised sports award equivalent to a doctoral degree, or a document certifying that the Applicant has won a gold, silver or bronze medal at starting from 1984 at Paralympic or Deaflympic Games, and a bachelor or higher-level diploma (in the case of a foreign qualification, proof of recognition or naturalisation of the qualification in Hungary)[[3]](#footnote-3). (A certified copy of the documents.) |
| In the case of Hungarian nationals, a document certifying habilitation or equivalent teaching experience acquired in an international higher education setting from the head of the institution submitting the application.[[4]](#footnote-4) (A certified copy of the documents.) |
| Academic title (if the Applicant has one) – Candidate of Science(s), Doctor of Science(s), Doctor of Sciences, Doctor of the Hungarian Academy of Sciences, recognised academic qualification obtained abroad – a certified copy of the diploma certifying the qualification. |
| Other Annexes: |
| The Applicant’s statement of consent to the processing, retention and lawful disclosure of personal data. |
| Other optional documents deemed important by the Applicant (e.g. diplomas, copies of awards) |

Note:

According to the Guidelines V.3 Checklist and formal requirements, the following documents must be uploaded as separate files to the TIR 2.0 database (and not included as attachments in the application): the publication list, an extract of the minutes of the Senate meeting, a cover letter from the rector or an institutional representative regarding the evaluation of the application, and *exclusively* in the field of *Medical and Health Sciences (excluding sports* *sciences*), at least two Q1 publications in a foreign language relevant to the Applicant’s field of expertise, as well as the full-length versions of articles meeting the minimum independent citation parameters (this applies even to Applicants who obtained the title of Doctor of the Hungarian Academy of Sciences within the last ten years).

ANNEX TEMPLATES FOR HUNGARIAN-LANGUAGE

APPLICATIONS

Certificate of teaching activities

........................................................... (name)

for the university professor application

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of higher education institution, faculty, organisational unit:  Address of higher education institution: | | | | | | | | |  |
| Teaching activities | | | | | | | | |  |
| **Period** *(10 academic years/semesters preceding the application)* | | Programme name(s) / level(s) /Subject name(s)  (academic year / semester) | Number of contact hours\* | | | | | Student feedback result  (for subjects taught during the 5 years preceding the application) |  |
| Lecture | Seminar | Practice session | Consultation | Total  (semester) |  |
| Academic year | I.  (semester) | 1. |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
| II.  (semester) | 1. |  |  |  |  |  |  |  |
| 2. |  |  |  |  |  |  |
|  | I.  (semester) | 1. |  |  |  |  |  |  |  |
| Academic year | 2. |  |  |  |  |  |  |  |
|  | II.  (semester) | 1. |  |  |  |  |  |  |  |
|  | 2. |  |  |  |  |  |  |  |

Summary\*\*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Teaching activities: | | Lecture | Seminar | Practice session | Consultation |  |
| Total number of contact hours: | |  |  |  |  |  |
| of which contact hours that are | online |  |  |  |  |  |
| recorded in an electronic system |  |  |  |  |  |
| Total contact hours: | | | | |  |  |
| Total lecture contact hours: | | | | |  |  |
| Total contact hours of subjects  scoring above 3.50 in student feedback: | | | | |  |  |

Date: ……………….

---------------------------------------------

Signature of direct supervisor

---------------------------------------------

Name of direct supervisor

\* Contact hour refers to any session (lecture, seminar, practice session, consultation) requiring participants to be present in person and lasting between 45 and 60 minutes, including online sessions.

\*\* If submitting multiple certificates, please summarise teaching activities by institution

Record of Teaching Activities in a Foreign Language

........................................................... (name)

for the university professor application submitted by

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Name of higher education institution, faculty, organisational unit:  Address of higher education institution: | | | | | | |  |
| Teaching activities | | | | | | |  |
| **Period** *(up to the date of application; academic year/semester)* | | Programme name(s) and level(s)\*, and subject name(s) in the language of delivery  (academic year/semester) | Number of contact hours\*\* | | | |  |
| Lecture | Practice session | Seminar | Total  (semester) |  |
| Academic year | I.  (semester) | 1. |  |  |  |  |  |
| 2. |  |  |  |  |
| **II.**  *(semester)* | 1. |  |  |  |  |  |
| 2. |  |  |  |  |
|  | I.  (semester) | 1. |  |  |  |  |  |
| Academic year | 2. |  |  |  |  |
|  | II.  (semester) | 1. |  |  |  |  |  |
|  |  | 2. |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Summary\*\*\* | | | | |  |
| Type of contact hour: | | Lecture | Practice session | Seminar |  |
| Total number of contact hours: | |  |  |  |  |
| of which contact hours that are | online |  |  |  |  |
| recorded in an electronic system |  |  |  |  |
| Total contact hours: | | | |  |  |
| Grand total of contact hours delivered as a guest teacher abroad: | | | |  |  |

Date: ……………….

---------------------------------------------

Signature of direct supervisor

---------------------------------------------

Name of direct supervisor

\*Programme level can be graduate and/or postgraduate, or any level in the Bologna system

\*\*=Contact hour refers to any session (lecture, seminar, practice session, consultation) requiring participants to be present in person and lasting between 45 and 60 minutes, including online sessions.

\*\* If submitting multiple records, please summarise teaching activities by institution

Declaration of scientific discipline

It must be completed in strict accordance with the classification system outlined in table V.1.1 Expert Classification System of the MAB within the Guidelines. Only one declaration relevant to the Applicant needs to be completed. Only in the field of *Medical and Health Sciences* can the disciplinary declaration be supplemented with the designation of the Applicant's narrower area of expertise.

Declaration

(if the Applicant requests the evaluation of his / her application in one discipline)

I, the undersigned, hereby declare that my previous scientific activities have been carried out in the field of …………………………………, in the discipline of ……………………………… (in the area of expertise of ……………………………).

I request that my university professor application be evaluated on the basis of the criteria applicable to following field of science: ………………………

Date: ………….., …………. (year) ................. (month) ........ (day)

………………………………….

Name/Signature

Declaration

(if the Applicant requests the evaluation of his / her application in more than one but not more than three disciplines)

I, the undersigned, hereby declare that my previous scientific activities have been carried out in the field(s) of …………………………………, in the following disciplines, and in the following ratios:

Primarily

1. in the discipline of …………………………….., in ……%.

and

1. in the discipline of …………………………….., in ……%,
2. in the discipline of …………………………….., in ……%.

Accordingly, I request that my university professor application be evaluated on the basis of the criteria applicable to following branches of science:

Primarily

1. in the discipline of …………………………….., in ……%.

and

1. in the discipline of …………………………….., in ……%,
2. in the discipline of …………………………….., in ……%.

Date: ………….., …………. (year) ................. (month) ........ (day)

………………………………….

Name/Signature

STATEMENT OF CONSENT

For the processing, retention, and lawful disclosure of personal data in accordance with statutory requirements.

I, the undersigned ………………………………………….…… (name), hereby consent to the processing of the personal data provided in my university professor application by the Hungarian Accreditation Committee (hereinafter: MAB), located at 1087 Budapest, Hungária Boulevard 40-44, Arena Corner Office Centre, Reception C, floor 5, in accordance with the provisions of Act CXII of 2011 on the Right to Informational Self-Determination and Freedom of Information, as well as MAB’s data protection regulations.

I acknowledge that the purpose of data processing is to provide an expert opinion regarding my university professor application.

I consent to the data controller, MAB, making my university professor application, which contains my personal data, accessible to the participants in the expert evaluation process as part of the decision-making procedure. This access will be provided under confidentiality obligations, both in paper form and electronically through storage in the TIR 2.0 database on MAB's server. Additionally, I agree to the publication of the expert opinion on MAB's official website (www.mab.hu), which will include the following details: MAB code, discipline, institution, and whether the application is supported or not supported.

The personal data is stored by the data controller, MAB, exclusively on servers under its direct physical control. Access to these servers is restricted to employees and experts involved in the evaluation procedure and is secured with password protection. Access to data is logged.

The data controller, MAB, will not disclose the data beyond the scope of the consent provided in this declaration and will ensure its protection in accordance with the law.

For the purpose of providing expert opinions, MAB processes data lawfully, fairly, and transparently, safeguarding the rights of natural persons and ensuring that data storage is limited to the time strictly necessary.

The staff of the MAB process, store and destroy the data concerned in accordance with the applicable legal provisions. Staff involved in data processing are bound by confidentiality obligations in accordance with their job descriptions and the Organizational and Operational Regulations of MAB. The data processed during the data management procedure is classified as official secrets. The data processed is covered by the obligation of professional secrecy. The experts process the data concerned in accordance with the applicable legal provisions and are bound by a declaration of confidentiality. The data are classified as confidential.

I understand that I may request information about the processing of my personal data by sending an email to [adatvedelem@mab.hu](mailto:adatvedelem@mab.hu) or to the address of the Hungarian Accreditation Committee, 1087 Budapest, Hungária körút 40-44. Arena Corner Office Centre, Reception C, floor 5, at any time, I can request information, or withdraw this declaration and request the correction, freezing or deletion of my personal data. If I believe that a violation of my rights has occurred regarding the processing of my personal data, I may initiate legal proceedings against the data controller or request an investigation by the National Authority for Data Protection and Freedom of Information (1363 Budapest, P.O. Box: 9) [ugyfelszolgalat@naih.hu](mailto:ugyfelszolgalat@naih.hu), +36-1-3911400, www.naih.hu).

Dated ………., ………. (year) ....................... (month) …… (day)

………………………………….

Name/Signature

1. Higher Education Act CCIV of 2011 (Nftv.) Section 105 (5). [↑](#footnote-ref-1)
2. Higher Education Act CCIV of 2011 (Nftv.) Section 101 (9). [↑](#footnote-ref-2)
3. Higher Education Act CCIV of 2011 (Nftv.) Section 104/B (2). [↑](#footnote-ref-3)
4. Higher Education Act CCIV of 2011 (Nftv.) Section 28 (5). [↑](#footnote-ref-4)