

Application Form

For the Applications by the Personal Data Possessor to the Data Supervisor

OVERVIEW

Personal data possessors (~~Starting From~~ now on, they will be named as the 'Applicant') who are defined as individuals in the Law on the Protection of Personal Data (LPPD) no. 6698 are entitled to demand certain rights related to personal data processing indicated in Article 11 in the LPPD.

Biçimlendirilmiş: Yazı tipi: (Varsayılan) +Gövde (Calibri)

According to Article 13/f.1, the applications, which ~~are is~~ to be made to our Company which is the personal data supervisor, should be sent to us in a written form or through the methods decided by the Personal Data Protection Board ~~to us~~.

➤ Applications in person:

The applicant can make her/his/their application to the address 'Maltepe Mahallesi Fetih Caddesi No:6 Dk:4 34010 Topkapı-Zeytinburnu /İstanbul' in person by taking the documents defining her/his/their identity with her/him and the print-out of the application form. The print-out of the application form must be filled out in full and signed.

➤ Application Through ~~the~~ Notary:

➤

➤ The personal data possessor can also apply to the address of our Company 'Maltepe Mahallesi Fetih Caddesi No:6 Dk:4 34010 Topkapı-Zeytinburnu /İstanbul' by sending the print-out of the application form through ~~the a~~ notary.

Biçimlendirilmiş: Yazı tipi: 12 nk

Biçimlendirilmiş: Liste Paragraf, Madde İşaretili + Düzey: 1 + Hizalandığı yer: 0 cm + Girinti yeri: 0,74 cm

'Information Request within the Scope of the Law on the Protection of Personal Data' must be stated on the ~~correspondence envelope~~ advice letter.

➤ With a secure electronic signature, through a Registered E-Mail (REM):

'Information Request within the Scope of the Law on the Protection of Personal Data' must be written in the subject section of the e-mail and sent to the address ysafak@hs03.kep.tr as an e-mail.

After the announcements made by the Personal Data Protection Board of ~~the other~~ application methods, our Company will make the necessary announcements related to the issue.

The points on which importance should be put, are indicated below:

- The application form must be filled out in full and the request should be stated clearly.
- The application form must be signed by the Personal Data Professor

herself/himself.

- ♦ According to the type of the request, required documents and information must be submitted ~~in an accurate and complete way~~ completely and accurately.

If not performed in this respect and/or if the required documents and information are not submitted as required, because the analyses to be made according to your request can not be carried out appropriately and in full by our Company, in such a situation, all legal rights of our Company are reserved. Thus, this Application Form must be sent to our Company in the appropriate ~~ways~~ methods indicated above.

The requests which are in the applications sent to our Company through one of the indicated ways, ~~according to the Article no. 13 paragraph 2 of the Law on PPD~~, the request will be finalized at the earliest time according to the type of the request and at the latest in thirty days starting from the arrival time of the application form to our Company, ~~according to Article 13 paragraph 2 of the Law on PPD~~ Our reply to the request will be notified to the Personal Data Processor in written form or electronically as indicated in ~~the Article no. 13 paragraph 2~~. Requests will be finalized with no charge. If a fee is to be demanded, the fee indicated by the Personal Data Protection Board in the price list will be demanded by our Company. All the operations regarding the ~~deletion~~, destruction and the anonymization of your personal data will be saved, and these records will be saved for at least three years except for the other legal responsibilities.

Biçimlendirilmiş: Yazı tipi: 12 nk

Biçimlendirilmiş: Normal, Madde işaretleri veya numaralandırma yok

A. Contact Information of the Applicant:

First Name(s)	
Last Name	
TR Identity Number (Passport no)	
Telephone Number	
E-Mail <i>(If you are to indicate your e-mail address, we can contact you faster.)</i>	
Address	

B. Please indicate your relation to our Company. *(Client, business associate, candidate employee, former employee, company employee of third parties, shareholder, etc.)*

<input type="checkbox"/> Client	<input type="checkbox"/> Business Associate
<input type="checkbox"/> Visitor	<input type="checkbox"/> Other:.....
The Department in the company you are related to:.....	
Subject:.....	

<input type="checkbox"/> I am a former employee. <i>The years during which I worked:.....</i>	<input type="checkbox"/> I made a job application/sent my CV
<input type="checkbox"/> Other:.....	<input type="checkbox"/> I am an employee of a third party company
	<i>Please indicate the name of the company you work for and your position</i>

C. In the scope of the Law on PPD, please indicate your request in detail:

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D. Please choose the way through which we will notify you with the answer to your application.

- I want it to be sent to my address.
- I want it to be sent to my e-mail address. *(If you are to choose the option through e-mail address, we can get back to you faster.)*
- I want it to be delivered by hand to me. *(If it is to be received per procurator on behalf of you, there should be a notarized procurator or a certificate of authority.)*

This application form is regulated to give an accurate answer in the legal time, by confirming your relationship to our Company, and if available, by defining your personal data processed by our Company. To provide the safety of your personal data and to eliminate the legal risks resulting from sharing data illegally or unwarrantedly, our Company reserves its rights to request additional documents and information (a copy of your identification card, driving license, etc.) for identification purposes and as authorization proof. Our Company rejects responsibility regarding requests resulting from unauthorized applications or misinformation in cases that the information that you provide in your request within the scope of this form is incorrect or outdated or if the application is made in an unauthorized manner.

Applicant (Personal Data Possessor):

First Name(s) and Surname:

Date of Application:

Signature: