

A. Applicant contact information:

Name and Surname	:	
T.C. No/Passport No	:	
Phone Number	:	
E-mail	:	
Address	:	

B. Please indicate your relationship with our Company. (Customer, business partner, employee candidate, former employee, third-party company employee, shareholder, etc)

<input type="checkbox"/> Customers	<input type="checkbox"/> Partner/Solution Partner/Consultant
<input type="checkbox"/> Visitors	<input type="checkbox"/> Other (Explain...)

The unit you are contact with within our company:

Topic:

<input type="checkbox"/> Former Employee Years Of Work: <input type="checkbox"/> Other:	<input type="checkbox"/> Job Application/CV Shared Date: <input type="checkbox"/> Third Party Company Employee <i>Please note that the company name and position information you are working with:</i>
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C. Please provide detailed your request under the KVKK:

Claim No.	Request Subject	Your Selection and Description
1	In accordance with Law No 6698 11/1-a I would like to know if my personal data is processed by your company.	<input type="checkbox"/>
2	In accordance with Law No 6698 11/1-c, if your company processes my personal data, I request information about these data processing activities.	<input type="checkbox"/>
3	In accordance Law No 6698 11/1-ç if my personal data is transferred to third parties in country or at abroad, I request the information of those third parties.	<input type="checkbox"/>

4	<p>According to Law No 6698 11/1-d, I think my Personal Data is missing or incorrectly processed and I want it corrected.</p> <p><i>Please write down your personal data you want to be corrected in the "Your Choice" field and send the documents showing the correct and supplementary information as an attachment. (Photocopy of identity card, residence, etc.)</i></p>	<input type="checkbox"/>
5	<p>In accordance with Law No 6698 11/1-e, although my personal data has been processed in accordance with the law and other relevant legal provisions, I think that the reasons requiring processing have disappeared and I demand that my personal data be deleted in this context</p>	<input type="checkbox"/>
6	<p>Although my Personal Data has been processed in accordance with the law and other relevant legal provisions, I think that the reasons requiring its processing have disappeared (Request No 5) and in this context, I request the deletion of my personal data from third party systems.</p>	<input type="checkbox"/>
7	<p>In accordance with Law No 6698 I think my Personal Data is missing or incorrectly processed. (Request No 4) I believe that these data also has been incomplete and misprocessed by the third party and I want it corrected.</p> <p><i>Please write down your personal data you want to be corrected in the "Your Choice" field and send the documents showing the correct and supplementary information as an attachment. (Photocopy of identity card, residence, etc.)</i></p>	<input type="checkbox"/>
8	<p>According to Law No 6698 11/1-g, I think that my personal data processed by your Company are analyzed exclusively through automated systems and as a result of this analysis I believe that a situation born against myself. I object to this conclusion. <i>Write the analysis result that you think is against you in the "Your Selection" field and send the documents supporting your objection as an attachment.</i></p>	<input type="checkbox"/>
9	<p>In accordance with 6698 sk 11/1-h, I have suffered losses due to the illegal processing of my personal data. I demand compensation for this damage. <i>Please Write the subject of the violation in the "Your Choice" field and submit supporting documents as an attachment. (Court decision, Board decision, documents showing the amount of material damage, etc.)</i> <i>It is recommended that to get legal support from an expert on the effects of your application under this article on timeout, etc., as you will affect your use of your legal rights.</i></p>	<input type="checkbox"/>

D. Please choose the method of notification of our response to your application:

- I want it sent to my address.
- I want it sent to my e-mail address.
(If you select the e-mail method, we will be able to respond to you faster.)
- I want to take delivery by hand.
(In case of receipt by proxy, a notarized power of attorney or a certificate of authorization is required.)

This application form has been determined by identifying your relationship with our company and, if any, to determine your personal data processed by our company, to respond to your relevant application accurately and in a legal time. Our Company reserves the right to request additional documents and information (copy of identity card or driver's license, etc.) in order to eliminate the legal risks that may arise from illegal and unfair data sharing and especially to ensure the security of your personal data. In case the information regarding your requests within the scope of the form is not correct and up-to-date, or an unauthorized application is made, our Company does not accept any liability for such wrong information or requests arising from unauthorized application.

Applicant (Personal Data Owner)

Name and surname :

Application date :

Signature: