

PERSONAL DATA PROTECTION LAW (KVKK) APPLICATION FORM

Under Article 11 of the Personal Data Protection Law No. 6698 ("KVKK"), personal data subjects (relevant persons) have the right to apply to the data controller and exercise the rights specified in the law. This form has been prepared to ensure that your applications are evaluated quickly and accurately.

1. Applicant Information

Full Name:

Turkish ID Number / Passport Number:

Phone Number:

E-mail Address:

Residential or Business Address for Notification:

2. Your Relationship with the Data Controller

- Customer
- Potential Customer
- Employee
- Former Employee
- Job Applicant / Candidate Employee
- Supplier / Business Partner
- Visitor
- Website User
- Other (Please specify): _____

3. Type of Request within the Scope of KVKK

- I would like to learn whether my personal data is being processed.
- If my personal data has been processed, I request information regarding it.
- I would like to learn the purpose of processing my personal data and whether it is used in accordance with its purpose.
- I would like to learn the third parties to whom my personal data has been transferred.
- I request correction of my personal data if it has been processed incompletely or incorrectly.
- I request the deletion or destruction of my personal data.
- I request that the correction/deletion operations be notified to third parties to whom my personal data has been transferred.
- I object to the result arising against me as a result of analysis by automated systems.
- I request compensation for the damage I have suffered due to unlawful processing of my personal data.

4. Description of the Request

Please explain your request in detail. If available, attach additional information and documents related to your request.

Description:

5. Method of Response to the Application

- I would like the response to be sent to my address by mail.
- I would like the response to be sent to my e-mail address.
- I would like to receive it in person.

6. Statement of the Applicant

I declare that the information and documents I have provided within the scope of this form are accurate and up to date. I accept that additional information may be requested to verify my identity in order to finalize my application.

Applicant's Full Name:

Signature:

Application Date:

7. Submission Channels

After completing the application form, you may submit it to the data controller using one of the following methods:

- Sending it in writing to the company address
- Via Registered Electronic Mail (KEP) address
- Via e-mail with secure electronic signature or mobile signature
- Sending it through the e-mail address registered in the company system