

APPLICATION FORM FOR THE USE OF DATA SUBJECTS' RIGHTS UNDER THE DATA PROTECTION LAW No.6698

This application form is prepared to allow you to exercise your rights as a data subject in the scope of Article 11 of Data Protection Law.

1. FAIR PROCESSING NOTICE

Your application and our response to your application may be retained and processed in our data recording medium in order to exercise our rights, or for the organization or management of applications, and may be transferred to our attorneys, data processor business partners, Data Protection Authority, Data Protection Board and other legal authorities carrying out procedures related to this application.

2. APPLICATION METHOD

You can submit your application signed and in writing or via KEP (Officially Registered E-mail Address), secure electronic signature, mobile signature, or the e-mail address stored in our records, provided by you, to Company. The Company may require additional confirmations (message to your registered phone, phone call etc.) depending on the nature and method of your application in order to determine whether the application is submitted by you and protect your rights. For example, if you submit an application via your e-mail registered in the company, we may contact you through another communication channel available to Company and ask to confirm that you are the applicant.

If you submit your application in signed and written form, it must be served to the Company. We will respond your written application in the shortest available time and within 30 days of its service. The application date for other application channels is the date your application is received. In the case the information and documentation provided with your application are incomplete or incomprehensible, we will contact you for clarification.

3. NOTIFICATION METHOD OF THE RESPONSE TO YOUR APPLICATION

The response to your application may be delivered to you in writing or via electronic means. In any case the information below will be included in our response to your application:

- Your Name and surname
- Your Turkish ID No (If you are a Turkish citizen)
- Your Passport no or, if available, ID no (If you are a foreigner)
- Your Home or work address stated in the written application receipt
- Your E-mail address, if available
- Your Phone and, if available, fax no

If the response to your application is in writing and longer than ten pages, the operation fee designated in the Data Protection Board's tariff under the Communiqué of Terms and Conditions for Application to Data Controller, will be requested for every extra page.

1.IDENTIFICATION AND CONTACT INFORMATION OF THE DATA SUBJECT (AND OF THE REPRESENTATIVE, IF ANY)

| | |
|--|--|
| Name - Surname | |
| Representative Name - Surname | |
| Turkish ID No (Passport no or nationality if you are a foreigner) | |
| Representative Turkish ID No (Passport no or nationality if you are a foreigner) | |
| Phone Number | |
| Home or Work Address Stated in the Written Application Receipt | |
| E-Mail Address, KEP Address, Phone Number, Fax Number (if available) | |

2.INFORMATION ON THE DATA SUBJECT

| | |
|--|--|
| My Affiliation with Your Company | |
| <input type="checkbox"/> Business Partner Company and position: | <input type="checkbox"/> Customer Company and position: |
| <input type="checkbox"/> Employee Department: | <input type="checkbox"/> Former Employee Years employed: |
| <input type="checkbox"/> Employee Candidate Date: | <input type="checkbox"/> Potential Customer Company and position: |
| <input type="checkbox"/> Supplier | <input type="checkbox"/> Company Partner and Representative |
| <input type="checkbox"/> Visitor Date: | <input type="checkbox"/> Other: |

3. MY REQUEST UNDER THE DATA PROTECTION LAW

Information and documentation regarding the application subject

You can specify here and send in with your application.

4. NOTIFICATION METHOD OF THE RESPONSE TO MY APPLICATION

Please select only one option

- I want it sent to my address.
- I want it sent to my e-mail address.
- I want to receive it by hand. *(In case of receipt by proxy, notarized power of attorney or certificate of authority is requested)*

5. MY DECLARATION AS DATA SUBJECT/REPRESENTATIVE

I hereby acknowledge and agree that I am authorized to make this application by law in my capacity as the Data Subject or as the legal representative of the Data Subject, that the information and documents contained in the application are up-to-date and correct, and that I do not provide any illegal, false or misleading information. I acknowledge that if I make an unauthorized application I may cause unfair or unlawful sharing of personal information on the application and that I will be liable for damages incurred by your Company and related persons.

Data Subject/Person Who Is Applying on Behalf of the Data Subject

Name Surname:
Application Date:
Signature:

Please fill separately if you are applying in writing:

Data Subject / Representative (Those who apply on behalf of their children or persons under their guardianship are required to submit an ID card and a certified guardianship order.)

Name and Surname :
Signature :