

CONCERNED INDIVIDUAL APPLICATION FORM

A. CONTACT INFORMATION OF THE RELEVANT PERSON

Full Name	
Turkish ID Number	
Phone Number	
Email	
Address	

B. INDICATE YOUR AFFILIATION WITH OUR COMPANY

Employee, Job Applicant, Former Employee, Third-Party Company Employee, Product or Service Recipient, Visitor, Business Partner, etc.	
Subject	

C. SPECIFY YOUR REQUEST IN DETAIL WITHIN THE SCOPE OF THE KVKK

D. CHOOSE THE METHOD OF NOTIFICATION FOR THE RESPONSE TO YOUR APPLICATION BY THE COMPANY/DATA CONTROLLER

- ☐ Send it to my address
- ☐ Send it to my KEP/email address
- ☐ Deliver in person (A notarized power of attorney is required for proxy pickup)

This application form has been prepared to accurately determine your personal data processed by our company, if any, by identifying your relationship with our company, in order to provide a correct and lawful response to your application within the legal timeframe. In order to eliminate legal risks arising from unlawful and unfair data sharing and especially to ensure the security of your personal data, our company reserves the right to request additional documents (such as ID card or driver's license copy) for identity and authorization verification

I acknowledge, declare and undertake that the personal data shared with the company in this application is accurate and up-to-date, that I have not made an unauthorized application and that I am aware that any legal and/or criminal liability that may arise to the contrary will be my responsibility.

Applicant (Concerned Individual) :

Full Name :

Application Date :

Signature :