

APPLICATION FORM ON PROTECTION OF PERSONAL DATA

A. Contact Information of the Data Owner

Name and Surname	:
ID Number	:
Phone Number	:
E-Mail Address	:
Address	:

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

□Customer	Business Partner / Solution Partner / Consultant
□Visitor	□Other (Explain)
The unit in which you communicate with in ou	r company:
Subject:	

□I am a Former Employee	□ I filed make a job Application/CV Sharing
Numbers of years of Employment:	Date:
□Other:	□ I am Third Party Company Employee Please indicate your company and position information:



C. Please indicate your request within the scope Personal Data Protection Law in detail:

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

- \Box I want it sent to my address.
- \Box I want it sent to my e-mail address.

 \Box I want to receive by hand – In case of acceptance by proxy, it is required to have a notarized power of attorney or certificate of authority.

This application form is prepared to determine your relationship with the Company and to determine the personal data processed by the Company, if any, for the purposes of responding to your application properly and within the legal period.

The Company may request additional documents and information for identification and authorization (certified documents of identification and contact information), in order to eliminate legal risks arising from data sharing and in particular to ensure the security of your personal data.

In the event that the information related to your requests submitted within the scope of the form is not accurate and not up to date or the application is not made by an authorized person, your request may not be processed by the Company.

Application Owner (Personal Data Owner)

Name Surname	:
Application Date	:
Signature	: