GENEKS MÜMESİLLİK VE TİCARET LİMİTED ŞİRKETİ APPLICATION FORM FOR REQUESTS AND COMPLAINTS REGARDING PERSONAL DATA

• Applicant contact details:

Name and Surname	:	
T.R IDENTITY NUMBER	:	
Phone	:	
E-mail	:	
Address	:	

• Please indicate your relation with our Company (e.g. client, business partner, prospective employee, former employee, employee of a third party company, shareholder)

ClientVisitor	 Business Partner/Solution Partner/ Consultant Other:
The unit you are in contact with within our con Subject:	npany:

Former Employee	• Date of Job Application / CV Sharing:
Years I Worked:	Third Party Company Employee
• Other:	Please specify the company and position you
ouner.	work for:

• Please specify your request in detail within the scope of the KVK Law (Law on Protection of Personal Data):

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- Please select the method by which you would like to be notified of our response to your application:

- I would like to receive it by hand.

(Note: If it is requested to be received by proxy, a notarised power of attorney must be submitted).

This application form has been issued in order to determine your relationship with our Company, to determine your personal data processed by our Company, if any, and to respond to your relevant application correctly and within the legal period. In order to eliminate the legal risks that may arise 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 and information (copy of identity card or driver's licence etc.) for identification and authorisation. In the event that the information regarding your requests submitted within the scope of the form is not correct and up-to-date or an unauthorised application is made, our Company does not accept any liability for the requests arising from such incorrect information or unauthorised application.

Applicant (Personal Data Owner) Name-Surname : Application Date : Signature :