

DATA SUBJECT APPLICATION FORM

General Information

TEKSERVİS TEKNİK VE TIBBİ ÜRÜNLERİ PAZARLAMA SAN. VE TİC. LTD. ŞTİ. (Data Controller) hereby declares that we have fulfilled our obligations as defined for data controllers in the Personal Data Protection Law No. 6698 ("KVKK"). Your personal data is processed for the legal reasons and purposes set out in the Privacy Notices prepared by us. The rights of the data subjects and the methods of exercising such rights are explained in detail in the Privacy Notices.

Please note that, in accordance with the second paragraph of Article 14 of Law No. 6698, it is not possible to apply directly to the Board without first applying to the data controller.

We hereby declare that the personal information you provide to us by filling out this form will be processed by us for the reasons set forth in Article 5 of Law No. 6698.

Application Topics

The rights of Data Subjects are set forth in Article 11 of the Personal Data Protection Law No. 6698. Accordingly:

ARTICLE 11- (1) By applying to the data controller, everyone has the right to:

- a) learn whether their personal data is being processed;
- b) seek information on how their personal data has been processed;
- c) learn the purpose of processing personal data and whether it is used in accordance with that purpose;
- ç) know the third parties to whom their personal data is transferred domestically or abroad;
- d) request correction of personal data in case of incomplete or incorrect processing;
- e) request deletion or destruction of personal data within the framework of the conditions provided for in Article 7;
- f) request communication of the processes carried out pursuant to subparagraphs (d) and (e) to third parties to whom personal data is transferred;
- g) challenge any result to their detriment upon analysis of their processed personal data exclusively through automated systems;
- h) claim compensation for their damages arising from unlawful processing of their personal data.

Application Methods

This form has been prepared to assist Data Subjects in exercising their rights. Data Subjects are not required to use this form when submitting their requests. However, the matters specified in this form regarding identity authentication and the method of submission shall apply.

Data Subjects can:

1. submit this form or their own petition, signed in ink, to the address “**Hüseyin Rahmi Sk. No: 7/7 06680 Çankaya, ANKARA**” in person or through their representatives. Identity authentication is mandatory in the application process. In applications made through a representative, an original copy of the power of attorney authorizing the request for personal data must be submitted.
2. send the application form or their own petition, signed in ink, to the address specified in the first paragraph by writing “Request for Information under the KVKK” on the envelope. The applicant's representative may also submit an application by mail, accompanied by a certified copy of the power of attorney authorizing the request for personal data.
3. apply through a notary public. The above address will also be used for applications made through a notary public. The subject line of the notification must read “**Request for Information under the KVKK.**”
4. Applications via email can be submitted to tekservis@tekservis.com. If this method is used, the subject line of the email must include the phrase “**Request for Information under the KVKK.**”

Response to Applications

Applications that meet the above conditions will be responded to promptly by us. This period may not exceed 30 days. Applications are free of charge; however, if the process entails additional costs, the fee determined by the Personal Data Protection Board may be charged.

The response provided by us may be delivered in person by the Data Subject or their representative in exchange for a signature, or it may be sent to the specified address or email address for proof of delivery of a response. The Data Subject must specify the method of notification of the response. If no method is specified, the response will be given using the method by which the request was submitted. The data controller reserves the right to request additional information from the person submitting the request.

1. CONTACT DETAILS OF THE DATA SUBJECT

NAME	
SURNAME	
TELEPHONE NUMBER	
ID NO	
EMAIL ADDRESS	
ADDRESS	

2. YOUR RELATIONSHIP WITH THE COMPANY

I am a visitor of the Data Controller.

I am an employee of the Data Controller.

I am a former employee of the Data Controller.

I have purchased/am purchasing products and services from the Data Controller.

I am a supplier, seller, etc. who has entered into a contractual relationship with the Data Controller.

Other (Please specify)

3. SELECT YOUR REQUEST IN ACCORDANCE WITH ARTICLE 11 OF THE PERSONAL DATA PROTECTION LAW

(Please mark the box(es) next to the statement that applies to your request with (X) and explain your request under the Personal Data Protection Law No. 6698 (KVKK) in detail in the section below.)

REQUEST NO.	SELECTION	REQUEST TOPIC	RELEVANT PROVISION	DESCRIPTION
1		I would like to know whether my personal data is being processed.	KVKK Art. 11/1-a	
2		If my personal data is being processed, I request information about the data processing activities.	KVKK Art. 11/1-b	

3		If my personal data is being processed, I would like to know the purpose of the processing and whether the data is being used in accordance with that purpose.	KVKK Art. 11/1-c	
4		If my personal data is being transferred to third parties within or outside the country, I would like to know who these third parties are.	KVKK Art. 11/1-ç	
5		I believe that my personal data has been processed incorrectly or incompletely, and I would like it to be corrected.	KVKK Art. 11/1-d	
6		Even though my personal data has been processed in accordance with the Law and other relevant legal provisions, I would like it to be deleted or destroyed.	KVKK Art. 11/1-e	
7		I would like the personal data that I believe has been processed incorrectly or incompletely to be corrected by the third parties to whom it has been transferred.	KVKK Art. 11/1-f	Please indicate the personal data you wish to have corrected in the box you have selected and send the documents showing the correct information as an attachment.

8		I want the personal data for which I have filed a request for deletion to be deleted also by third parties to whom it has been transferred.	KVKK Art. 11/1-f	
9		I want to challenge the unfavorable result that has arisen through the analysis of the processed data exclusively by automated systems.	KVKK Art. 11/1-g	Please indicate the analysis result that you consider to be unfavorable to you in the box you have selected and send the documents related to your objection as an attachment.
10		I claim compensation for the damage I have suffered due to the unlawful processing of my personal data.	KVKK Art. 11/1-ğ	Please indicate the reason why you consider the damage you have suffered is unlawful in the box you have selected and send the documents related to this matter as an attachment.

4. SELECT THE METHOD OF NOTIFICATION OF THE RESULT OF YOUR APPLICATION

	I would like it to be sent by mail to the address I have specified above.
	I would like it to be sent to the email address I have specified above.
	I would like to receive it in person. (If it is to be received by proxy, a notarized power of attorney or authorization document is required.)

This application form has been prepared to identify your relationship with the data controller and, if applicable, to determine your personal data processed by the data controller in its entirety, so that your application can be responded to correctly and within the legal timeframe. In order to eliminate legal risks that may arise from unlawful and unfair data sharing, and in particular to ensure the security of your personal data, the data controller reserves the right to request additional documents and information (such as a copy of your identity card or driver's license) for the purpose of identity authentication and authorization verification. The data

controller will not be held liable for any requests based on incorrect or outdated information provided in the form or unauthorized applications.

APPLICANT'S	
Full Name:	
Date of Application:	
Signature:	