

DOKU ESTETİK VE SAĞLIK HİZMETLERİ TİCARET LİMİTED
ŞİRKETİ
Personal Data Application Form

Pursuant to Law No. 6698 on the Protection of Personal Data (“KVK Law”), individuals defined as data subjects (“hereinafter referred to as the *Applicant*”) are granted certain rights under Article 11 of the KVK Law to make requests regarding the processing of their personal data.

In accordance with Article 13, paragraph 1 of the KVK Law, the Applicant must submit requests concerning these rights to our Company, as the data controller, either **in writing** or through other methods determined by the **Personal Data Protection Board (“the Board”)**.

Applications to be submitted within this framework

may be submitted to our Company:

• **In writing**

o Postal Address: MERKEZ MAHALLESİ İSTİKLAL SOKAK NO: 9/75 ŞİŞLİ, İSTANBUL

• **Through a notary public**

o Postal Address: MERKEZ MAHALLESİ İSTİKLAL SOKAK NO: 9/75 ŞİŞLİ, İSTANBUL

In addition, once other methods to be determined by the Board are announced, our Company will provide information on how applications will be received through these methods.

Applications submitted to us will be responded to within **thirty (30) days** from the date of receipt, depending on the nature of the request, in accordance with Article 13, paragraph 2 of the KVK Law.

Our responses will be delivered to you **in writing or electronically**, in accordance with the provisions of Article 13 of the KVK Law.

(Your application will be processed **free of charge**; however, if the process requires an additional cost, a fee may be charged according to the tariff determined by the Board.)

A. Applicant contact information:

Name:	
Surname:	
TR ID No. / Passport No.:	
Phone Number	
E-mail	
Address:	

B. Applicant's relationship with our company:

<input type="radio"/> Customer	<input type="radio"/> Business partner	<input type="radio"/> Visitor	<input type="radio"/> Other
<input type="radio"/> Former Employee	<input type="radio"/> I shared my job application/resume	<input type="radio"/> I am an employee of a third-party company	
The unit you are in contact with within our company:			
Years I worked (For former employees):			
The company I work for and the position I hold (For third-party company employees):			
Application Subject and Request:			

C. Please select the method by which you will be notified of our response to your application:

I want it sent to my address.	<input type="radio"/>
I want it sent to my email address.	<input type="radio"/>
I would like to receive it in person.	<input type="radio"/>

The application form has been prepared to identify your relationship with our Company and, if applicable, fully identify your personal data processed by our Company, so that we can respond to your application accurately and within the legally required timeframe. To eliminate legal risks that may arise from unlawful and unfair data sharing and, in particular, to ensure the security of your personal data, our Company reserves the right to request additional documentation and information (such as a copy of your ID card or driver's license) to verify your identity and authorization. If the information you submit regarding your requests is not accurate and up-to-date, or if an unauthorized application is submitted, our Company assumes no liability for requests resulting from such inaccurate information or unauthorized application.

In accordance with the requests I have stated above, I request that my application to your

Company be evaluated in accordance with Article 13 of the Law, and that I be informed accordingly.

I hereby declare and undertake that the documents and information I have provided to you in this application are accurate, up-to-date, and belong to me.

I hereby consent to the processing of the information and documents I have provided in this application form by your Company, in accordance with Article 13 of Law No. 6698 on the Protection of Personal Data, for the limited purposes of evaluating and responding to my application, delivering it to me, and determining my identity and address.

Applicant (Personal Data Owner)

Name and Surname:

Application Date:

Signature: