

FORM FOR REQUESTING INFORMATION FROM THE DATA CONTROLLER

A. Data subject's contact information: Name: Surname: Turkish citizenship number: Phone number: **Email address:** Address: B. Please specify your relation to ARGELA as the data subject. (i.e. customer, former employee, third-party company employee, etc.) To be filled out by those receiving services from Argela ☐ I am a customer ☐ I am an ex-customer ☐ Other: Departments from which services were received:..... To be filled out by employees ☐ I applied for a job/shared my CV ☐ I am a current employee Date: ☐ I am a former employee Years during which I worked at the ☐ I am a third-party company employee company: Please indicate your employer and position

.....

☐ Other:



C. Please specify your request under the Turkish Personal Data Protection Law (KVKK) in detail:
Remarks
Please fill out this form and provide a signed copy of it via any of the following means:
 by visiting the following address in person: Reşitpaşa Mah. Katar Cad. No:4 İTÜ ARI Teknokent 3 İç Kapı No:502/601-604 34467 Maslak, Sarıyer, Istanbul, or any of our branches where we can verify your ID by emailing our Company's KEP (registered electronic mail) address argela@hs09.kep.tr by emailing kvkk@argela.com.tr with your secure electronic or mobile signature via any other method stipulated in the KVKK and applicable legislation, so long as we can verify
your ID
This application form that you have filled out has been prepared in order that we can determine your relationship with Argela and to respond to your request for information on the use of your personal data processed by Argela, if any, correctly, completely, and within the legal deadline. Argela reserves the right to request additional documents and information (copy of identity card or driver's license, etc.) for ID/authority verification, in order to eliminate legal risks that may arise from illegal and unfair data sharing and especially to ensure the security of your personal data. Argela is not liable for any issues that may arise when sending the request by post/email. In the event that the information you provide in the form is not correct and up-to-date, or an unauthorized request for information is made, Argela does not accept any liability for unauthorized requests/requests containing false information.
Date of application:
Name and surname of the applicant
Signature
Date on which the request was received:
Name and surname of the party receiving the request

Signature