

APPLICATION FORM

EXPLANATIONS:

Article 11 of the PPD Law No. 6698 states that data subjects (applicants) have to right to make certain requests regarding the processing of their personal data.

As per Article 13, clause 1 of the PPD Law; applications in regards to these rights must be submitted to our Company (data controller) in writing or through other methods determined by the Protection of Personal Data Board.

In this context, all written applications that are submitted to our Company must be done with a copy of this form and with the following:

- An official application of the applicant made in person
- Via notary,
- Add your “secure e-mail signature” in accordance with the No. 5070 Electronic E-mail Law and submit to our registered Company e-mail

Methods and processes regarding the submission of applications:

1. Make a personal appeal to our Gayrettepe Mah. Prof. Dr. Bülent Tarcan Cad. Selvi Sok. No:1 Otim Binası B Blok 34349 Fulya-Beşiktaş/İstanbul address with an identification document and with an envelope titled Information is Required in the context of the PPD Law.
2. If the application is to be made via notary, registered person or proxy, write Information is Required on the notification envelope and submit to our Gayrettepe Mah. Prof. Dr. Bülent Tarcan Cad. Selvi Sok. No:1 Otim Binası B Blok 34349 Fulya-Beşiktaş/İstanbul address
3. If completed in an electronic environment, add your “secure e-mail signature” and write PPD Information Request as the subject of your e-mail and send to info@mngtargem.com

In accordance with Article 13, Clause 2 of the PPD Law, your submitted applications will be responded to within 30 days from when it reaches us, depending on the context of the claim. The response will be delivered to you in line with Article 13 in writing or electronically.

Applicant's contact details:

Name
Surname
Telephone Number
E-mail
Address

Please state your relation with our company. (Ex. Customer, business partner, potential employee, former employee, third party company employee, shareholder)

<input type="checkbox"/> Customer	<input type="checkbox"/> Business Partner
<input type="checkbox"/> Visitor	<input type="checkbox"/> Other:
The department of our Company with whom you are in contact with:.....	
Subject:	

<input type="checkbox"/> Former Employee	<input type="checkbox"/> Job Application / I shared my C.V
<i>Çalıştığım Yıllar :</i>	<i>Date :</i>
<input type="checkbox"/> Other:	<input type="checkbox"/> Third Party Firm Employee
	Please state the firm you work for and the position you hold

