**FORMFLEKS OTOMOTİV YAN SANAYİ VE TİCARET A.Ş.**

**PERSONAL DATA PROTECTION APPLICATION FORM**

**1. INTRODUCTION**

This Application Form has been prepared by **FORMFLEKS OTOMOTİV YAN SANAYİ VE TİCARET**

**A.Ş.( FORMFLEKS A.Ş. or the Company)** in its position as data controller in order to quickly, effectively and comprehensively evaluate and resolve any applications as may be submitted by you, the data subject, under articles 11 and 13 of the Law no 6698 on the Protection of Personal Data (LPPD).

**2. APPLICATION METHOD**

Pursuant to articles 11 and 13 of the LPPD, data subjects may, by filling out this application form in writing, submit any requests they wish to address to our company as data controller with regard to the implementation of the LPPD by using the following methods or any other methods that may be established by the board.

The methods for submitting the application form are as follows:

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| --- | --- |
| ☐ | The data subject maysubmit her/his request by **personally applying** to the FORMFLEKS A.Ş.*, Minareliçavuş Bursa OSB Mahallesi, Mavi Cadde, No:25, Nilüfer / BURSA* address with a signed copy of this application form,  |
| ☐ | After filling out this form, the data subject may **send an email to our registered electronic mail (KEP) address (formfleks@hs03.kep.tr) or to the (kvkk@formfleks.com.tr) address with a secure/mobile signature,** |
| ☐ | The data subject may submit a signed copy of this application form to the **kvkk@formfleks.com.tr address provided that the person concerned uses the electronic mail address previously notified to the data controller and which has been registered in the data controller’s system.**  |

**3. THE DATA SUBJECT’S DETAILS**

We kindly request that you fill out all of the information indicated below so that we are able to get to know you in relation to the application you are submitting pursuant to the relevant provision of the LPPD and so that FORMFLEKS A.Ş. is able to conduct the requisite research, assessment and resolution.

|  |  |
| --- | --- |
| **Name and Surname\*** |  |
| **T.R. ID No\*** |  |
| **Address\*** |  |
| **Telephone Number\*** |  |
| **E-mail Address\*** |  |

*\*Required fields*

The personal data you have submitted to us above is being collected in order to assess and resolve this form and so that it is possible to contact you and shall not be subject to data processing for any other purpose.

Please indicate the appropriate option to reflect your relationship with FORMFLEKS A.Ş and state in the space provided below whether or not the relationship is still ongoing.

☐ Former Employee ☐ Visitor ☐ Customer

☐ Employee ☐ Business Partner ☐ Intern

☐ Job Applicant ☐ Supplier ☐ Other (……………….)

**4. DATA SUBJECT’S REQUESTS**

As the data subject, please check the relevant box for the circumstance(s) about which you would like to be informed under the scope of articles 11 and 13 of the LPPD.

|  |  |  |
| --- | --- | --- |
| *YOUR REQUEST* | *INFORMATION/DOCUMENT REQUIRED* | *YOUR SELECTION* |
| 1. I wish to learn whether or not my personal data is being processed byFORMFLEKS A.Ş. | If you wish to obtain information with regard to a specific type of data please indicate that here.…………………………………………………………………………………...……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 2. I wish to learn for what purpose my personal data is being processed by FORMFLEKS A.Ş.  | If you wish to obtain information with regard to a specific type of data please indicate that here.…………………………………………………………………………………...……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 3. I wish to learn whether or not my personal data is being used by FORMFLEKS A.Ş. in a manner suitable for its purpose. | If you wish to obtain information with regard to a specific type of data please indicate that here.…………………………………………………………………………………...……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 4. If my personal data is being transmitted to third persons located in Turkey or abroad, I wish to have the third person to whom my data is being transmitted identified. | If you wish to obtain information with regard to a specific type of data please indicate that here.…………………………………………………………………………………...…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 5. I believe that the personal data being processed is incomplete or erroneous and request that these be corrected/rectified.  | Please indicate which data being processed you believe to be incomplete or erroneous as well as how such information should be corrected. …………………………………………………………………………………...……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 6. I wish for the personal data being processed that I believe to be incomplete or erroneous be corrected by the third persons to whom it has been transmitted  | Please indicate which data being processed you believe to be incomplete or erroneous as well as how such information should be corrected.…………………………………………………………………………………...……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 7. I am requesting the erasure/destruction of my personal data since it is no longer necessary for the purpose for which it was processed. | Please indicate the data covered by this request and which result you believe to be contrary to your interests. Please include any information documents that serve as proof for such claims in the appendix to this form. …………………………………………………………………………………...……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 8. I wish for my personal data to be erased by the third person to whom it has been transmitted since it is no longer necessary for the purpose for which it was processed. | If this request pertains only to a portion of your personal data, please indicate which data together with any information and documents evidencing the grounds for your request. Please include any information documents that serve as proof for such claims in the appendix to this form.…………………………………………………………………………………...…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 9. I believe that the personal data being processed by FORMFLEKS A.Ş. is being analyzed exclusively by automated systems and that such analysis has led to a result contrary to my interests. I am objecting to this result.  | Please indicate the grounds for your request and the result concerning your request for information. Please include any information documents that serve as proof for such claims in the appendix to this form. …………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 10. I am requesting indemnification for the damages I have suffered as a result of the unlawful processing of my personal data.  | Please indicate the grounds for this request and the damages you believe you have suffered in the space below. Please include any information and documents (any decisions handed down by the Personal Data Protection Board or court rulings) that serve as proof for such claims in the appendix to this form. ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… | ☐ |
| 11.Other | Please briefly explain and state the subject of your request, which has not been covered by the options listed above. …………………………………………………………………………………… | ☐ |

In the case of applications made on behalf of the data subject by third persons, this form must be sent to us together with a notarized power of attorney and in the case of applications made on behalf of minor children, documents evidencing parentage/guardianship must be sent to us together with this form.

In order to ensure the security of your personal data, FORMFLEKS A.Ş may contact you within **seven (7) days** of receiving your request for information in order to confirm that you are in fact the data subject and may request certain information or documents from you with regard thereto. Any information and documents you provide us within this context shall immediately be destroyed as soon as your identity as the data subject has been confirmed.

If the information and documents requested are incomplete, you must convey the completed information and documents upon FORMFLEKS A.Ş.’s request. The **thirty (30) day** period granted for finalizing requests under article 13/2 of the LPPD shall be suspended until we have received all the necessary information and documents.

**5. FINALIZING THE DATA SUBJECT’S REQUEST**

Pursuant to the LPPD, your request will be responded to as quickly as possible and at the latest within **thirty (30) days** as of the date we receive it, depending on the nature of your request. Pursuant to article 13 of the LPPD, our responses and assessments will be conveyed to you either electronically or in writing as per the choice you indicate on this form. If you have a preference regarding the transmission of the results of your application via mail, e-mail or fax, please indicate so below.

|  |  |
| --- | --- |
| I would prefer the application results to be sent to my email address.  | ☐ |
| I would prefer my application results be mailed to me through the post.  | ☐ |
| I would prefer my application results to be sent to my registered electronic mail (KEP) address.  | ☐ |

FORMFLEKS A.Ş. will resolve your application free of charge. In the event that the response process gives rise to any additional costs, charges may apply at rates determined in line with the relevant legislation.

**6. REPRESENTATIONS OF THE DATA SUBJECT**

I kindly request that the information request form I have submitted pursuant to the LPPD be evaluated and concluded in light of the request(s) I have specified above. I agree, represent and warrant that the information and documents I have provided to you in this application are correct, current and belong to me.

Furthermore, I represent and warrant that I have been informed that it could be necessary for the company to request additional information in order to finalize my application and that if the action taken requires additional costs, I will be required to pay the rates set by the Personal Data Protection Board.

|  |  |
| --- | --- |
| **Data Subject** |  |
| Name and Surname |  |
| Application Date |  |
| Signature |  |

This application form has been prepared in order to accurately and without any mistakes identify the data being processed by our company and respond to your application within the legal time period. When conducting an evaluation as a result of your application, our company reserves the right to request information and documentation in order to verify your identity. The applicant warrants that her/his information is correct and up-to-date within the context of this application form. In the event that the information is not accurate or up-to-date, or an application is submitted without authorization, our company is not liable for any requests made based on inaccurate information or without the proper authorization.

This application form has been prepared for requests submitted on the basis of the rights listed in article 11 of the Law no 6698 on the Protection of Personal Data. These requests are handled in accordance with articles 11 and 13 of the Law no 6698 and the principles and procedures specified in article 5 of the Communiqué on the Principles and Procedures for Requests Submitted to Data Controllers.