## **APPLICATION FORM**

## I. INFORMATION REGARDING THE APPLICANT

Name-Surname	:					
Turkish Identity Number	:					
Nationality and Passport Number (if foreigner)	:					
Address	:					
Mobile Phone	:					
E-Mail Address	:					
Your Relationship With Our Association	:	□ Visitor	☐ Member	□ Employee	□ Other	
Has Your Relationship With Our Association Ended?	:					
II. REQUESTS	OF T	HE APPLICA	NT			
Within the scope of the Law on Protection of Personal Data No: 6698 (the "LPPD"), our Association is considered to be 'data controller', and in accordance with Article 11 of the LPPD, the rights you possess and use against the Association are as below. Please be reminded that; the applicant may only apply on her/his behalf, and our Association will refuse the application if it is determined that the application is made on behalf of someone else. Therefore; our Association has the right to ask various questions to the applicant in order to confirm identity.						
Please mark which requests you wish to make in accordance with the relevant article and explain in detail.						
☐ To obtain confirmation as to whether or not personal data concerning the data subject are being processed						
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☐ If personal data has been processed, to access to the personal data
$\hfill\Box$ To obtain information regarding the purposes of the processing and whether the personal
data is used in line with such purposes,
☐ To obtain information regarding the recipients to whom the personal data have been or will be disclosed both domestically and in abroad,
be disclosed both domestically and in abroad,
$\Box$ To request from the controller rectification of personal data, if the personal data have been processed in an incomplete and wrong manner
••••••••••••••••••••••••••••••••
$\Box$ To request the deletion or destruction of personal data if the grounds permitting the processing of personal data do no longer exist within the scope of Article 7 of the LPPD,
☐ To request the notification of the third parties whom the personal data are transferred to regarding the rectification if the personal data have been processed in an incomplete or wrong manner or the deletion or destruction of personal data in accordance with Article 7 of the LPPD,

$\Box$ To object to any adverse result that occurs exclusively from personal data via automatic systems,	m analysing the processed
☐ To claim compensation if any damage is incurred due to unlaw data	

Subject to change according to the scope and properties of the application you have submitted, our Association will in accordance with Article 13/2 of the LPPD, provide you with an answer in writing or through electronic means as soon as possible and within 30 (thirty) days at latest, upon the receipt of your application.

## III. DECLARATION OF THE APPLICANT

I request to receive information regarding my application to your Association in accordance with the requests I have marked and detailed above.

I accept, declare and undertake that the information and documentation I have submitted with this application form are correct, up to date and belong to me. I allow PETFORM to process the information and documentation I have submitted with the application form only for the limited purposes of evaluating my application, replying to my application, delivering my application to me, and determining my identity and address.

□ I request that the reply be sent to the address stated in the Application Form.

□ I request that the reply be sent to the electronic mail address stated in the Application Form.

(We will be able to reply more quickly to you if you choose delivery via E-Mail.)

□ I request to receive by hand. (In the event of receipt via proxy, notarized power of attorney or notarized certificate of authorization is required. This requirement is also applicable for family members.)

Applicant's (Data Subject) Name Surname:

Application Date:

Signature: