APPLICATION FORM FOR DATA SUBJECTS

1. Application Method

With this form, you may submit your requests regarding your rights listed in Article 11 of the Law on the Protection of Personal Data numbered 6698 ("Law"), using one of the methods described below, in accordance with Article 13 of the Law and Article 5 of the Communiqué on Procedures and Principles for Applications Filed to Data Controllers.

	APPLICATION METHOD	APPLICATION ADDRESS	INFORMATION TO BE INCLUDED IN APPLICATION
1. Application in Writing	Application in person bearing wet signature, via a notary public or courier/mail	Levent 199, Büyükdere Caddesi No:199 34394 Şişli/İstanbul	The statement "Request for Information Under the Law on Protection of Personal Data" will be available on the envelope/notification
2. Via Registered Electronic Mail (KEP)	Via the registered electronic mail (KEP) address	zorluteks@hs03.kep.tr	The statement "Request for Information Under the Law on Protection of Personal Data" will be available on the subject line of email.
3. Application via the e-mail address available in our system	By using your e-mail address registered in our company's system	kvkzorlutekstil@zorlu.com	The statement "Request for Information Under the Law on Protection of Personal Data" will be available on the subject line of email.
4. Application via an e-mail address not available in our system	By using your e-mail address that does not exist in our company's system, including mobile signature/e-signature	kvkzorlutekstil@zorlu.com	The statement "Request for Information Under the Law on Protection of Personal Data" will be available on the subject line of email.

2. Your Identity and Contact Details

Please fill in the fields below so that we can contact you and verify your identity.

Name and surname	:	
Turkish Identity Number / Passport Number or Identity Number for Citizens of Other Countries	:	
Residential Address / Workplace Address for Notices	:	
Mobile phone number	:	
Phone number	:	
Fax Number	:	

3. Your Relationship with Us

Your	Relationship	with	Our	:	Customer	Employee	
Comp	any						
					Former	Other (Please	
					Employee	Specify)	

4. Subject of Request

Please write documentation		-	-	Information	and

5. Choose the Method of Notification to You of the Reply

I wish the reply to be sent to my postal address that I provided in part 2.
I wish the reply to be sent to my e-mail address that I provided in part 2.
I wish the reply to be sent to my fax number that I provided in part 2.

In line with the requests I have stated above, I hereby request you to evaluate my application filed to your company and inform me about the consequences of your evaluation in accordance with Article 13 of the Law.

I hereby declare and undertake that the information and documentation I have provided to you with this application are correct and up-to-date, that your company may request any additional information in order to finalize my application, and that I may have to pay a fee fixed by the Personal Data Protection Board if the application requires additional costs.

Applic	cant's ((Data	Sub	ject)	Ì
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Name & Surname : Application Date :

Signature :