

## FORM FOR FILING AN APPLICATION TO THE DATA CONTROLLER

### INFORMATION

The interested parties who are data owners (“**Applicant**”), who are defined as data subjects in the Personal Data Protection Law no. 6698 (the “**Law**”), are granted certain rights to make requests with regard to the processing of their personal data in article 11 of the Law.

As per the first paragraph of article 13 of the Law entitled “request to the data controller”, as the data subject, you may make a request to the data controller **Unicollect İnteraktif Hizmetler ve Danışmanlık Anonim Şirketi (“Uniconsult”)** in the form of a written request and application using this form within the framework of one of the options listed below, or by other means to be determined by the Personal Data Protection Board (the “**Board**”).

The written requests to be made to **Uniconsult** may be transmitted to us by printing out this form and submitting it;

- With the personal application of the applicant, *(by way of authentication through submitting a T.R. ID Card)*
- Via notary or certified mail with return receipt requested, to our correspondence address *(Barbaros Mah. Begonya Sk. No:7 A+Live Plaza Kat:11 Ataşehir/İSTANBUL)*.

The requests you submitted to us in writing will be replied free of charge “as soon as possible and within thirty days at the latest” following our receipt said request and depending on the nature of said request, pursuant to paragraph 2 of article 13 of the Law. However, if the procedure involves additional costs, **Uniconsult** shall charge the fee specified in the tariff determined by the Board. Our replies will be sent to you in writing or via electronic media pursuant to the provisions of article 13 of the relevant Law.

With this application form, depending on your application and request, all of the information and documentation requested from you must be transmitted to us in a complete and accurate manner. We would like to inform you that, if the required information and documents are not submitted by you as requested, this may hinder the full and qualified performance of the investigations to be carried out by **Uniconsult** as per your request. **Uniconsult** hereby declares that, in such a case, it will reserve its legal rights. Therefore, the relevant forms must be submitted in complete form, containing all of the requested information and documents, depending on the nature of your request.

### 1. APPLICANT’S IDENTITY AND CONTACT INFORMATION

You must provide the following information for us to define the “applicant” related to your application and to carry out the necessary investigations within **Uniconsult** depending on the nature of your request.

The contact information you need to provide is requested for us to obtain more detailed information from you regarding your request, inform you about our investigation processes and deliver you the results of your application.

<b>Name-Surname:</b>	
<b>T.R. ID Number:</b>	
<b>Phone Number:</b>	
<b>E-Mail:</b> <i>(If specified, we will be able to get back to you more quickly)</i>	
<b>Address:</b>	

In order to ensure the security of your personal data, within ten (10) days following the receipt of your information request by **Uniconsult**, **Uniconsult** may contact you to confirm that you are the data subject and request certain information and documents from you in this regard.

**2. PLEASE SPECIFY YOUR RELATIONSHIP WITH UNICONSULT.**

*(e.g. Client, Business Partner, Employee Candidate, Former Employee, Third Party Company Employee, Shareholder, Supplier's Employee, Supplier's Officer etc.)*

<input type="checkbox"/> Client <input type="checkbox"/> Visitor	<input type="checkbox"/> Business partner <input type="checkbox"/> Others: .....
You have contacted the following within our organization: Department/Person:..... Regarding: ..... ..... .....	
<input type="checkbox"/> Former Employee <i>Years Employed :</i> ..... <input type="checkbox"/> Other: ..... .....	<input type="checkbox"/> I Have Submitted a Job Application / CV <i>Date : .....</i> <input type="checkbox"/> I am a Third Party Company Employee <i>Please specify the company and your position in the company</i> .....

**3. PLEASE SPECIFY YOUR REQUEST IN DETAIL WITHIN THE FRAMEWORK OF THE PERSONAL DATA PROTECTION LAW:**

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**4. EXPLANATIONS REGARDING THE SUBJECT OF THE REQUEST:**

*\*Please pick the one that is relevant to your request.*

<b>Req. No</b>	<b>Subject of the Request</b>	<b>Your choice (you must fill it out)</b>
1	I would like to learn whether my personal data are processed by <b>Uniconsult</b> or not*.	Yes                  No
2	I would like to request information about the data processing activities if my personal data are being processed by <b>Uniconsult</b> .	Yes                  No
3	If my personal data are being processed by <b>Uniconsult</b> , I would like to learn the purpose of the processing of my personal data and whether these personal data are used in compliance with the purpose*.	Yes                  No
4	I would like to know the third parties to whom my personal data are transferred in country or abroad*.  <i>Personal Data Protection Law art. 11/1 (ç)</i>	Yes                  No
5	I believe my personal data have been processed incompletely or inaccurately and I would like them rectified.  <i>Write down the personal data you wish to be rectified in the field “Your Choice” and submit the additional documents with accurate and supplementary information. (e.g. copy of the ID card, certificate of residence etc.)</i>  <i>Personal Data Protection Law art. 11/1 (d)</i>	My data to be rectified are as follows;
6	I believe that although my personal data have been processed in accordance with the law and the other relevant legal provisions, the reasons for its processing are no longer relevant and for this reason I would like my personal data to be;  a) Erased.  b) Anonymized.  <i>Personal Data Protection Law art. 11/1 (e)</i>	<i>Pick only one option.</i>  a)  b)

7	<p>I would like my personal data, which I believe to have been processed incompletely or inaccurately (Request No 5), rectified for the third parties to which they were transferred as well. <i>Write down the personal data you wish to be rectified in the field “Your Choice” and submit the additional documents with accurate and supplementary information. (e.g. copy of the ID card, certificate of residence etc.)</i></p> <p><i>Personal Data Protection Law art. 11/1 (f)</i></p>	<p>My data to be rectified are as follows;</p>
8	<p>I believe that although my personal data have been processed in accordance with the law and the other relevant legal provisions, the reasons for its processing are no longer relevant (Request No 6) and for this reason, for the third parties to which my personal data were transferred as well, I would like my personal data to be;</p> <p>a) Erased. b) Anonymized.</p> <p><i>Personal Data Protection Law art. 11/1 (f)</i></p>	<p><i>Pick only one option.</i></p> <p>a)  b)</p>
9	<p>I believe that my personal data, which was processed by <b>Uniconsult</b>, was solely analyzed through automated systems which led to the occurrence of a result against me. I would like to object to this result.</p> <p><i>Write down the analysis result you believe to be against you in the field “Your Choice” and submit the additional documents that support your objection.</i></p>	<p>Data Revealed as a Result of the Analysis;</p>
10	<p>I have sustained damages due to the unlawful processing of my personal data. I would like compensation for this damage.</p> <p><i>Write down the matter that caused the processing to be unlawful in the field “Your Choice” and submit the additional documents that support your claim. (e.g. Court’s decision, Board’s decision, Documents that show the amount of the pecuniary damages etc.)</i></p>	<p>Matter that Caused the Processing to be Unlawful;</p>
<p>As per the requests I listed below, I kindly request my application to <b>Uniconsult</b> to be evaluated pursuant to article 13 of the Law and to be informed accordingly.</p> <p>Full Name :</p> <p>Date of Application :</p> <p>Signature :</p>		

**5. PLEASE SELECT THE METHOD OF NOTIFICATION OF OUR REPLY TO YOUR REQUEST:**

I would like it to be sent to my address.

**The address of your choosing:**

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I would like it to be sent to my e-mail address.

*(If you choose the e-mail method, we will be able to get back to you more quickly.)*

**The e-mail address of your choosing:**

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I would like it to be personally delivered.

**(Note: If to be received by proxy, a notarized power of attorney or certificate of authorization must be produced upon delivery.)**

We would like to inform you that, this form for filing an application to the data controller was drafted to identify your relationship with **Uniconsult**, determine exactly which of your personal data is to be processed by **Uniconsult** (if any), and to respond to your request within the legally prescribed time limit. If the applicant is a proxy, a power of attorney must be enclosed in this application form as an annex. In order to eliminate any legal risks that may arise from unlawful an unauthorized disclosure and fulfill our obligations towards ensuring the security of the data as the data controller, **Uniconsult** reserves the right to request additional documentation to verify your identification and authorization. If **Uniconsult** is of the opinion that an application was not filed according to a basis that is acceptable by Law and/or is unable to find a legal basis for the application, **Uniconsult** shall not accept or reply to such applications. Uniconsult does not accept any responsibility for any requests that are based on inaccurate or outdated information or made without authorization. If more than a reasonable amount of effort is required to investigate or reply to an application, **Uniconsult** reserves the right to charge the fee specified in the tariff determined by the Board for such application.

**Applicant's Full Name:**

(Personal data subject)

**Date of Application:**

**Signature:**