



**KVKK Instruction
Application Form to Data
Controller**

Doküman No :KYS.KVKK.FR.06

Yürürlük Tarihi :01.04.2020

Revizyon Tarihi :00

Revizyon No:00

Sayfa No:1 / 4

APPLICATION FORM TO KVKK DATA CONTROLLER
MARY PALACE RESORT&SPA

1.Information about the applicant:

Name:		
Surname:		
Identification Number:		
E-mail address: *		
Mobile Number:		
Address:		

2.Indicate your relationship with our establishment.

<input type="checkbox"/> Client	<input type="checkbox"/> Consultant/ Solution Partner/ Business Partner
<input type="checkbox"/> Visitor	<input type="checkbox"/> Other (Please, explain)

The unit you are in contact with our Establishment: Subject:
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I applied for a job, sent my CV Date: I am a third party company employee (Please provide details about the company you work for)	Former staff Years worked: Other (Please explain)
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HAZIRLAYAN

KONTROL EDEN

ONAYLAYAN



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Sayfa No:2 / 4

3.Please explain your request within the scope of KVKK No.6698 in detail

4. The applicant's request (Please tick the box next to the item that matches your request.)

- I request to know whether your establishment is processing my personal data or not.
- If my personal data is processed within the scope of your establishment, I request to be informed within the scope of this data processing activity.
- If my personal data is processed within the scope of your establishment, I request to indicate the purpose of the personal data processing activity and whether it is used in accordance with the purpose of processing.
- If my personal data is transferred to third parties in the country or abroad, I request that such third parties be informed.
- I believe that my personal information is incomplete or incorrectly processed and I request their correction.

On request, the following information and documents should be submitted to our establishment:

- The content of your personal data that you believe is incomplete or incorrect and that you request correction,
- Documents proving that your personal data are up to date and correct

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Sayfa No:3 / 4

Although my personal data has been processed in accordance with the provisions of Law No. 6698 and other relevant provisions, if the reasons for processing my personal data disappear;

Deletion

or

I request it to be made anonymous.

* Upon your request, information and documents explaining why the reasons for processing your personal data are not obvious, should be submitted to our establishment.

If the reason for processing my personal data has disappeared, I request that this situation be communicated to third parties who process my personal data.

On request, informative information and documents regarding why you think the reasons for processing our personal data do not exist should be submitted to our establishment.

5. Choose how to respond to your application.

I prefer sending to my address.

I prefer to be sent via my e-mail address. (We will be able to inform you in a shorter time if you prefer e-mail delivery.)

I prefer the delivery to be delivered by hand.

I prefer it to be made to a person authorized by power of attorney.

If delivery is requested through a power of attorney, a notarized power of attorney or a certificate of authorization is required.

* If you are the guardian or guardian of the personal data owner, a document showing this must be submitted.

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Sayfa No:4 / 4

This application form has been created in order to provide an accurate and up-to-date response to your application within the legal period by determining your personal data, if any, processed by our establishment, by determining your relationship with our establishment.

Our establishment always reserves the right to request additional information and documents identifying your personal data in order to prevent the unlawful sharing of your personal data with third parties and to ensure the security of your personal data.

Our establishment does not accept any responsibility for the fact that the information regarding your requests submitted within the scope of the KVKK application form is not accurate and up-to-date, or for requests arising from unauthorized applications, I accept and undertake that all legal and criminal liability will be on my side in the occurrence of any other situation.

Personal Data / Applicant:

Name Surname:

Application Date:

Signature:

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