PERSONAL DATA OWNER APPLICATION FORM

1. GENERAL

Hereby Application Form has been prepared by Estetikland, Esthetics and Beauty Center in the capacity of data controller, for the applications to be made pursuant to the 11th and 13th Articles of the Personal Data Protection Law by the data owners to be evaluated and analyzed as soon as possible, effectively and comprehensively.

2. APPLICATION METHOD

Pursuant to the 11th and 13th Articles of the Personal Data Protection Law, as data owners you can send your requests regarding the implementation of the Personal Data Protection Law to Antakya Eva acting in the capacity of data controller;

- Personally, in writing by filling out hereby Application Form,
- By mail, sent to the address Mecidiyeköy, Mecidiye Cd. No:5, 34387 Şişli/İstanbul
- ➤ By secure electronic signature or mobile signature, to the electronic mail address notified to Estetikland previously and registered in our system, by writing "Information Request on Personal Data Protection Law".

3. INFORMATION OF THE DATA OWNER

You must fill in the following fields correctly and completely in order for the research and evaluations regarding your applications to be done and for solutions to be developed regarding the matter.

Name and Surname (Signature on	
written application)	
TR ID No/Passport No	
Correspondence address	
E-Mail/Phone/Fax No	
Subject of Request	

Your personal data that you have submitted to us above is being processed in order to evaluate, complete and contact you with this Application Form.

Specify whether the current relationship is ongoing or not, by selecting the appropriate option for your relationship with Estetikland, .

Patient		
Business Partner		
Visitor Employee		
Other ()		
My relationship with Estetikland continues as of the date of the application.		
My relationship with Estetikland has ended as of the date		

4. DATA OWNER'S REQUESTS

As the data owner, please specify in the fields shown in the table below, the subject/topics that you want to be informed about, as well as the method of conveyance of our responses to you and, if any, whatever you want to add, within the scope of the articles 11 and 13 of the Personal Data Protection Law. You must add the information and documents related to the subject you have specified to the Application Form.

INFORMATION REQUEST	RESPONSE CONVEYANCE METHOD (Phone/E-mail/ Mail/Fax/Hand Delivery)	NOTES
I would like to be informed of		
whether my personal data is		
being processed, if so, which		
of my data is being processed		
I would like to be informed of		
the purpose of my data being		
processed and whether these		
are being used in a way that		
fits the purpose or not		
I would like to be informed of		
the third parties my data has		
been shared with		
domestically and/or abroad		
I am of the opinion that my		
data is being processed		
incompetently or wrong and I		
wish for these to be		
corrected and notice to be		
given to the third parties the		
data was shared with		
I wish for my personal data to		
be deleted/destroyed/made		
anonymous due to the fact		
that the reasons for their		
processing not being valid		
anymore and notice to be		
given to the third parties the		
data was shared with		
I do not accept the outcome		
to arise against me in		
consequence of my		
processed personal data		
being analyzed by exclusively		
automatic systems.		

For applications to be made by third parties on behalf of the data owner, a notarized power of attorney must be sent to us along with hereby Application Form, and for applications to be made on behalf of those under guardianship and children, a copy of the documents confirming the custody/guardianship relationship must be sent along with hereby Application Form.

This application form has been prepared in order to determine your relationship with Estetikland and to respond to your application correctly and within the legal period in full and in accordance with the law regarding your personal data processed by Estetikland, if any. In order to ensure the security of your personal data, additional documents will be requested for identification and authorization.

5. DATA OWNER'S DECLARATION

I request for the information acquisition application that I made pursuant to the Personal Data Protection Law to be finalized by evaluating it in accordance with the request/requests I have specified above and for me to be informed according to the method I have specified, I accept, declare and undertake that the information and the documents I have submitted are up to date and belong to me, that Estetikland may request additional information/documents to be able to finalize my application and that I was informed of the fact that I may have to pay the fee determined by the Personal Data Protection Board in the event of extra payment being required.

Date of Application:

Name and Surname of the Applicant: