Name Surname	:	
Turkish Republic Identity Number	:	
Passport Number	:	
Phone Number	:	
E-Mail	:	
Address	:	

A. Applicant's Contact Information:

☐ Other:

В. Please specify your relationship with our company. (Customer, business partner, employee, Job Applicant, former employee, third-party company employee) Business Partner/Solution Customer Partner/Consultant Visitor Former Employee Employee Other (Explain...) Department within ÇAKIR İNŞAAT İTH. İHR. SAN. VE TİC. LTD. ŞTİ with which you are in contact: Subject: I am a former I have applied for a job/shared my resume Date: employee Years I worked: I am an employee of a third-party company

C. Please provide detailed information about your request within the scope of the Law on Protection of Personal Data (KVKK).

Please specify the name of the company you

work for and your position:

	Please choose the method of communication for our response to be conveyed to you in application:
	I want it to be sent to my address.
☐ (If yo	I want it to be sent to my email address. ou choose the email method, we will be able to respond to you more quickly.)
•	I prefer to receive it in person. ne case of proxy collection, a notarized power of attorney or authorization document is ired.)

This application form has been prepared to determine your relationship with ÇAKIR İNŞAAT İTH. İHR. SAN. VE TİC. LTD. ŞTİ., if any, and to accurately identify your personal data processed by ÇAKIR İNŞAAT İTH. İHR. SAN. VE TİC. LTD. ŞTİ., if applicable, in order to respond to your application correctly and within the legal timeframe. To eliminate legal risks arising from unlawful and unjust data sharing and especially to ensure the security of your personal data, ÇAKIR İNŞAAT İTH. İHR. SAN. VE TİC. LTD. ŞTİ. reserves the right to request documents and information (such as ID card or driver's license copy, etc.) for identification and authorization. ÇAKIR İNŞAAT İTH. İHR. SAN. VE TİC. LTD. ŞTİ. does not accept liability for incorrect information or unauthorized applications submitted within the scope of this form, and will not be responsible for requests based on inaccurate information or unauthorized submissions.

Applicant (Data Subject)
Name Surname :
Application Date :
Signature :