

DATA SUBJECT APPLICATION FORM

For Requests Under Article 11 of Law No. 6698

This form has been prepared for you to submit your requests concerning your personal data to Türkiye Kooperatif Ticaret Eğitim ve Büro İşçileri Sendikası İktisadi İşletmesi İstanbul Şubesi ("the Enterprise" — İZZ Hotel Koşuyolu). It is sufficient to complete the form and send it through one of the channels below.

1. Applicant Details

The following fields are mandatory under Article 5 of the Communiqué on the Procedures and Principles of Application to the Data Controller.

Name and Surname	
Turkish ID Number	
If a foreign national: nationality, passport or ID number	
Residential or business address for service of notice	
Telephone Number	
E-mail Address	

Your relationship with the Enterprise

☐ Hotel guest	☐ Visitor	☐ Employee
☐ Former employee	☐ Job candidate	☐ Supplier
Other (please specify)		

2. If the Application Is Made Through a Representative

A copy of the document evidencing the power of representation must be attached for a legal representative, and a copy of the power of attorney containing special authority in respect of the application must be attached for an attorney. Leave this section blank if you are applying on your own behalf.

☐ Legal representative (parent / guardian)	☐ Attorney
Name and Surname of Representative	
Contact Details of Representative	

3. Your Request

Please tick the rights under Article 11 of the Law that you wish to exercise. You may tick more than one option.

☐	I wish to learn whether my personal data is processed.
☐	If my personal data has been processed, I request information in this regard.
☐	I wish to learn the purpose of processing my personal data and whether it is used in accordance with that purpose.
☐	I wish to know the third parties in Türkiye or abroad to whom my personal data has been transferred.
☐	I believe my personal data has been processed incompletely or inaccurately; I request its rectification.
☐	I request the erasure or destruction of my personal data.
☐	I request that the rectification or erasure be notified to the third parties to whom my data has been transferred.
☐	I object to an adverse outcome arising from the analysis of my data exclusively by automated systems.
☐	I request compensation for the damage I have suffered due to the unlawful processing of my personal data.

☐	I withdraw the explicit consent I previously gave.
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Please explain your request (which process, which data, which date range):

4. Method of Response

☐	By post to the address I stated above.
☐	To the e-mail address I stated above.
☐	I wish to collect it in person.

5. Declaration and Signature

I declare that the information I have provided in this form is accurate and up to date, and that the Enterprise may request additional information or documents from me where necessary in order to conclude my request.

Date of Application	
Name and Surname	
Signature	

6. Information

- Your application will be concluded within thirty days at the latest from the date it reaches the Enterprise.
- Applications are free of charge as a rule. Where the process entails an additional cost, the tariff set out in Article 7 of the Communiqué may be applied (1 TRY per page for written responses exceeding ten pages; the cost of the medium for responses provided on a recording medium). As at the effective date of this form, no fee is charged.
- Where mandatory information in the form is missing, you will be asked to remedy the deficiency. If the deficiency is not remedied within the period given, the application may be rejected on procedural grounds.
- If your application is rejected, if you find the response insufficient or if no response is given within the period, you may lodge a complaint with the Personal Data Protection Board within thirty days from the date you learn of the response and in any event within sixty days from the date of application.
- The personal data you provide in this form is processed solely for the purpose of evaluating and concluding your application, on the legal ground of fulfilling our legal obligation under Art. 5/2-(ç) of the Law.

7. Application Channels

In writing and in person	Acıbadem Mahallesi, Şeyh Galip Sokak No: 11, Kadıköy / İstanbul, Türkiye (delivered to reception)
Notary	To the above address through a notary
E-mail	kvkk@izzhotelkosuyolu.com
Registered e-mail (KEP)	turkiyekoopisiktisadiisletmesi@hs01.kep.tr