

**RİPKA EVROMODA SHOES INDUSTRY DOMESTIC AND FOREIGN
COMMERCIAL LTD. CO.**

**LAW ON PERSONAL DATA PROTECTION NO.6698 DATA SUBJECT
APPLICATION FORM**

General Statement

Data subjects, who are defined as relevant person in the Law on Personal Data Protection (the Law), are vested with certain rights in relation to their personal data processing in Article 11 of the Law. As for applications lodged to our Company in its capacity as data controller Pursuant to Clause 1 of Article 13 of the Law;

- Original signed application form will be submitted to us personally or with the agency of notary along with a document providing identity verification.
- Application form can be signed with a electronic signature under the Law on Electronic Signature No.5070
- Application form should be submitted to us with one of the methods set forth by the Personal Data Protection Board (the Board).

You can find information below on how you can submit us written applications forms.

1. Application Method

Application Method	Application Address	Information to be specified in submitting application
Personal Application (Applicant will come to our office with a document that will verify its identity)	Aksaray Cad. No:34/35 Laleli İstanbul	'Information request under Law on Personal Data Protection' will be written on envelop
Notification with the agency of notary	Aksaray Cad. No:34/35 Laleli İstanbul	Information request under Law on Personal Data Protection' will be written on notification envelop

Using electronic signature	info@evromodashoes.com.tr (Registered Email Address)	Information request under Law on Personal Data Protection' will be written in the subject field of email.
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Application that you have submitted to us will be responded, depending on nature of your request, within thirty days upon arrival date of your application to us pursuant to Clause 2 of Article 13 of the Law. Our responses, as per provision of Article 13 of the Law, will be reached to you in writing or electronically.

2. Identity and Contact Information

First (and Middle where possible) Name	
Surname	
Identity Number	
Phone	
Email	
Address	

3. **Please inform us your relation with our company:** (e.g. customer, business partner, employee nominee, former employee, third party company employee, shareholder)

<input type="checkbox"/> Customer	<input type="checkbox"/> Business Partner
<input type="checkbox"/> Visitor	<input type="checkbox"/> Other

The department you are in contact with in our company
Subject:

<input type="checkbox"/> I am a former employee. The period when I worked:	<input type="checkbox"/> Job Application/ I have submitted my CV. Date:
<input type="checkbox"/> I am a third party company employee.	Please, inform us the company you work and your position in the company:
<input type="checkbox"/> Other

4. Please let us know your request under the Law:

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5. Please let us know notification method to your part of our response for your application:

- I want it to be sent to my address.
- I want it to sent to my email address. (If your choose this method, we can respond you more quickly.)
- I want to take over it personally. (In case of vicariously taking over, there must be a letter of proxy or an authorization document.)

This application form is made out so that our company can respond for your requests accurately and within legal time by determining your relation with our company and, if it applies, determining completely your processed personal data. Our company reserves its right to request additional information and document (identity card or driving license etc.), on the purpose of

eliminating legal risks which may result from illegal and unlawful personal data sharing and in particular providing your personal data security, for the confirmation of identification and authorization. If your request that you are about to submit through this form is not accurate and up to date or if unauthorized application is made, our company shall not assume a liability for those requests including wrong information or unauthorized application.

Applicant Relevant Person (Data Subject)

Name :

Application Date :

Signature: :