MEDEX Sağlık ve Teknoloji Çözümleri Yatırım A.Ş.
Yaşamkent Mah. 3066 Sok. No:10 06810 Çankaya/Ankara
Phone: +90 216 515 36 02 Fax: +90 850 225 0083
E-mail: info@medex-cro.com Web: www.medex-cro.com

DATA SUBJECT APPLICATION FORM

The personal data owners ("**Applicant**"), who are defined as "data subjects" in the **Law on the Protection of Personal Data No. 6698** ("**KVKK**"), are granted the following rights under Article 11 of the KVKK:

- Learn whether your personal data is being processed,
- Request information if your personal data has been processed,
- To learn the purpose of processing your personal data and whether they are used in accordance with their purpose,
- To know the third parties to whom your personal data is transferred domestically or abroad,
- To request correction of your personal data in case of incomplete or incorrect processing and to request notification of the transaction made within this scope to third parties to whom your personal data has been transferred,
- Although it has been processed in accordance with the provisions of the KVKK and other relevant laws and other legislation, in the event that the reasons requiring its processing disappear, to request the deletion or destruction of your personal data and to request notification of the transaction made within this scope to third parties to whom your personal data has been transferred,
- To object to the occurrence of a result to your detriment by analyzing the processed data exclusively through automated systems,
- To request compensation for damages in case you suffer damage due to unlawful processing of your personal data.

Pursuant to paragraph 1 of Article 13 of the KVKK and the ***Communiqué on the Procedures and Principles of Application to the Data Controller***, the applications to be made to **MEDEX SAĞLIK VE TEKNOLOJİ ÇÖZÜMLERİ YATIRIM A.Ş. ("Company")** regarding these rights must be submitted in writing or by sending an e-mail to kvkk@medex-cro.com by using the e-mail address previously notified to our Company by you and registered in our Company's system or by other methods to be determined by the **Personal Data Protection Authority** (hereinafter referred to as the **"Board"**) in the future.

In this context, applications to be made to our Company "in writing" shall be made by printing out this form;

- Upon personal application to our Company by the Applicant,
- via our registered electronic mail (KEP) address medexsaglik@hs01.kep.tr
- By notary public or registered letter with return receipt,
- If the Applicant has an e-mail address registered in our Company's systems, by sending an e-mail from this address to our Company's kvkk@medex-cro.com address,

will be forwarded.

The table below provides information on how the applications of the persons concerned will be delivered to us in terms of written application channels:

Application Method	**Where to Apply** **Address**	**Application Submission** **Information to be specified**
In Person Application (Applicant must come to the application address in person and apply with a document certifying his/her identity)	Yaşamkent Mah. 3066 Sk. Kapı No:10/ Çankaya-ANKARA	"Information Request within the scope of the Law on the Protection of Personal Data" will be written on the envelope.
Notification through a notary public	Yaşamkent Mah. 3066 Sk. Kapı No:10/ Çankaya-ANKARA	"Information Request within the scope of the Law on the Protection of Personal Data" will be written on the notification envelope.
Sending e-mails from Registered Electronic Mail (KEP) address	medexsaglik@hs01.kep.tr	"Information Request within the scope of the Law on the Protection of Personal Data" will be written in the subject section of the e-mail message.
Sending e-mails from your e-mail address registered with our company	kvkk@medex-cro.com	"Information Request within the scope of the Law on the Protection of Personal Data" will be written in the subject section of the e-mail message.

Your applications submitted to us will be answered within thirty (30) days from the date of receipt of your request, depending on the nature of the application, in accordance with paragraph 2 of Article 13 of the KVKK. Our responses will be delivered to you in writing or electronically in accordance with the provision of Article 13 of the KVKK.

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A. Applicant Contact Information

Name :

Surname :

Passport Number :

Telephone Number :

:

E-mail :

Address :

B. Please indicate your relationship with our Company.

□ Employee Candidate □ Current Employee □ Former Employee	□ Business Partner (Dealer, Supplier, etc.) □ Customer □ Other: .....
Department / Unit you are in contact with our company:	
Contact Subject:	

□ Former Employee *Please indicate the years you have worked for our Company:* ……	□ Prospective Employee (I applied for a job) *Please indicate the date of your application to our Company:* ……

□ Customer *Please specify your shopping date and the relevant dealer:* ……	□ Third Party Company Employee *Please indicate the company you work for and your position.* ……..
□ Other (Please specify): ……	

C. Please specify your request in detail within the scope of KVKK.

_____
_____
_____
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D. Please select the method by which you will be notified of our response to your application:

□ I want it sent to my address.

□ I want to pick it up in person.

□ I would like a reply to the e-mail address to which I sent the form and which is registered in your system.

(In case of delivery by proxy, a notarized power of attorney or authorization document must be present and attached to this Application Form).

This Application Form has been issued in order to determine your relationship with our Company, to determine your personal data processed by our Company, if any, and to respond to your relevant application accurately and within the legal period. In order to eliminate the legal risks that may arise from unlawful and unfair data sharing and especially to ensure the security of your personal data, our Company reserves the right to request additional documents and information (copy of identity card or driver's license, etc.) for identification and authorization. In the event that the information regarding your requests you submit within the scope of the Application Form is not accurate and up-to-date or an

unauthorized application is made, our Company does not accept any liability for the requests arising from such incorrect information or unauthorized application.

Applicant (Data Subject);

Name / Surname :

Application Date :

Signature :