

INFORMATION OF THE APPLICANT:

Name :

Surname :

Phone number :

E-mail :

Address :

Please indicate your relationship with the company.

Client

Business Partner / Solution Partner / Consultant

Old Employee (worked years): Job application / Share CV (Date):

Other (Please explain...)

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Write down your request within the scope of Article 11 of the KVKK in a clear and understandable manner;

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Please indicate in which way you request the return of your application.

Please, send it by post to my adress

Please, send it to my e-mail address.

I'm going to receive it by hand.

The Company reserves the right to request additional information and documents to verify your identity in order to prevent the sharing of your personal data unlawfully with third parties and to ensure the security of your personal data. I hereby acknowledge and agree that I am aware that the personal data I share with the Company in this application form is accurate and current, that I do not make any unauthorized applications and that I will be liable for any legal and / or criminal liability that may be in question.

Applicant :

Name Surname :

Application date :

Signature