



Mars Lojistik Grup A.Ş - Mars Hava ve Deniz Kargo Taşımacılığı A.Ş. - Mars Lojistik Uluslararası Taşımacılık Depolama Dağıtım ve Tic. A.Ş. - Mars Sigorta Aracılık Hizmetleri Ltd. Şti.

(“Mars Lojistik” - “Mars Hava ve Deniz Kargo” - “Mars Sigorta”)

APPLICATION FORM

A. Data Subject’s Contact details:

*Name & Surname:

*Turkish Identity No.:

*Telephone and Fax

Numbers:

* Electronic mail

address

*Work or Residential

Address:

B. Please specify the data subject’s relationship with Mars Logistics. (e.g. Employee, former employee, etc.)

If currently an Employee, the fields below shall be completed

<input type="checkbox"/> I am a Current Employee	<input type="checkbox"/> I shared my Job Application/Curriculum Vitae
<input type="checkbox"/> I am a Former Employee	<i>Date:</i>
<i>Years of Service:</i>	<input type="checkbox"/> I am an Employee of a Third-Party Company
<input type="checkbox"/> Other:	<i>Please specify the company that you work for and your position details</i>
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.....

* It is required that the fields marked with an asterisk should be completed pursuant to Article 5 entitled Application Procedure as specified in the Communiqué on the Procedures and Principles regarding Application to the Data Controller prepared based on article 13 and subparagraphs (e) and (g) of the first paragraph of article 22 of the Law no. 6698 on Protection of Personal Data. If this field is left blank in your application, your application will not be processed.

C. Please specify the company that the data subject will apply to.

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| <input type="checkbox"/> Mars Lojistik Grup A.Ş.
<input type="checkbox"/> Mars Hava ve Deniz Kargo Taşımacılığı A.Ş.
<input type="checkbox"/> Mars Lojistik Uluslararası Taşımacılık Depolama Dağıtım ve Ticaret A.Ş.
<input type="checkbox"/> Mars Sigorta Aracılık Hizmetleri Ltd. Şti. |
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D. * Please specify in detail your request under the Law on Protection of Personal Data. Please attach the information and documents related with your request to your application.

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Explanation

After completing this form, you can deliver a signed copy of it;

- to the address of Mahmutbey Mah. Taşocağı Yolu Cad. Balance Güneşli 19/7 İşyeri:72 Istanbul in person, thus allowing for completion of your identity verification; or
- send it to the following KEP (Registered E-mail) addresses of our Companies;
⇒ marslojistikgrup@hs03.kep.tr
⇒ marshavadenizkargo@hs03.kep.tr
⇒ marslojistik@marslojistik.hs03.kep.tr
⇒ marssigorta@hs03.kep.tr; or
- send it to the e-mail address of kvkk@marslogistics.com.tr using your secure electronic or mobile signature; or
- send it to us via other procedures specified in the Law and related legislation, through verification of your identity.

This application form that you have completed has been arranged for the purpose of replying your relevant application accurately and within the statutory period by identifying your relationship with our Company, and using, if you, your personal data processed by our Company completely and appropriately. Our Company reserves its right to request additional information and documents for verification of identity and authorization (copy of Identification card or driving license, etc.) in order to prevent any legal risks that may result from unlawful and unfair data transfer and particularly to ensure the safety of your personal data. Our Company is not **responsible** for any issues that may occur at the time of postage to address / e-mail transmission. In case that the information related with your requests that you hereby submit under the Form is not accurate or up-to-date or if an unauthorized application is made, our

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Company disclaims liability for any requests that may result from such incorrect information or unauthorized applications.

Application Date:

Applicant's Name & Surname:

*** Signature**

Date the Application is received:

Application Received by (Name & Surname):

Signature

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