

UNDER THE LAW ON THE PROTECTION OF PERSONAL DATA NUMBER 6698 APPLICATION FORM FOR DATA OWNERS TO USE THEIR RIGHTS

In accordance with Article 13 of the Law and Article 5 of the Communiqué on the Procedures and Principles of Application to Data Controller, you can submit your requests within the scope of your rights listed in Article 11 of the Personal Data Protection Law No. You can forward your application to our Company. In order for your request to be fulfilled, fill out the following application form clearly and fully, and send it to ASELSAN Konya Weapon Systems JSC, Aşağıpınarbaşı Area, Selçuklu/KONYA, by mail. We will respond to your application as soon as possible and within 30 days at the latest. If the information and documents you have submitted to us are incomplete or incomprehensible, we will contact you to clarify your application.

Your Identity and Contact Information:

Please fill in the fields below so that we can contact you and verify your identity.

| Name and surname | |
|--|--|
| | |
| TR Identity Number/ Other | |
| Passport or Identity Number | |
| for Country Citizens | |
| Main Place of Notification | |
| address | |
| Office address | |
| | |
| Mobile number | |
| | |
| Secondary Phone Number | |
| | |
| Fax Number | |
| | |
| F '1 11 | |
| E-mail address | |
| | |
| Your Relationship with Our | |
| Company (Employee, | |
| Customer, Former Employee, Employee | |
| Nominee, Shareholder etc.) | |
| , | |

| Demand You are kindly requested to write your request regarding the processing of your Personal Data clearly | |
|---|--|
| and in detail and attach the relevant annexes and documents to your application. | |
| | |
| The answer I have stated above; | |
| I want it sent to my postal address. | |
| I want it sent to my e-mail address. | |
| I want it sent to my Fax Number. | |
| In line with the requests I have stated above, I request that my application to your company be evaluated in accordance with Article 13 of the Law and inform me. | |
| I declare and undertake that I have been informed that the information and documents I have provided to you in this application are correct and up-to-date, that your company may request additional information in order to finalize my application, and that I may have to pay the fee determined by the Personal Datva Protection Board if it requires additional costs. | |
| Applicant Relevant Person (Data Owner) Name | |
| and Surname : Application date : | |
| Signature : | |