UCARER Women's Health

Data Subject Request Form (KVKK / GDPR)

Under the Turkish Personal Data Protection Law No. 6698 ("KVKK", Art. 11) and the GDPR, you may exercise your rights as a data subject by completing and sending us this form. Your request is handled free of charge within 30 days at the latest.

1. Applicant Information

Full name: .....

National ID / Passport No: .....

Address: .....

Phone: .....

E-mail: .....

Relationship with the data controller (patient / visitor / other): .....

2. Subject of the Request (tick the relevant box)

☐ I wish to learn whether my personal data is being processed.
☐ If processed, I request information about it.
☐ I wish to learn the purpose of processing and whether it is used accordingly.
☐ I wish to learn the third parties to whom data is transferred (domestic / abroad).
☐ I request correction of incomplete / inaccurate data.
☐ I request deletion / destruction of my data.
☐ I request that correction/deletion be notified to third parties.
☐ I object to a result against me arising solely from automated analysis.
☐ I request compensation for damage due to unlawful processing.
☐ I withdraw my explicit consent (including marketing/communication).

3. Preferred Reply Method

☐ By e-mail
☐ By post (to the address above)
☐ In person

4. Declaration

I declare that the information in this form is true and current, and that this request belongs to me.

Full name: ..... Date: ...../...../..... Signature: .....

Data Controller: UCARER Women's Health • E-mail: info@ucarerwomenshealth.com • Web: ucarerwomenshealth.com
Please send your request to the e-mail address above.