Personal Data Protection Explicit Consent Text

This explicit consent text is for the "Call Center" department within DOKU ESTETIK VE SAGLIK HIZMETLERI TICARET LIMITED SIRKETI and is intended for the "Patient" person groups for the "Informing Patients about Treatment Processes" activity.

Under the Personal Data Protection Law No. 6698, DOKU ESTETIK VE SAGLIK HIZMETLERI TICARET LIMITED SIRKETI has provided me with a detailed and understandable explanation, through an informative text, about my personal data to be processed, including the processing purposes, to whom and for what purposes it can be transferred, the method and legal reason for collecting, the identity of the data controller, and my rights. I have read the said informative text.

Data	Processing Purposes	Recipient	Transfer	International
Category		Groups	Purposes	Transfer
Health Information	Execution of Customer Relationship Management Processes, Planning and Execution of Service Processes, Planning and/or Execution of Treatment Process Support Service Activities, Planning and Execution of International Health Tourism Processes	Social Media Platforms, Suppliers, WhatsApp Application	Planning and Execution of Service Processes, Planning and Execution of Treatment Processes and Support Service Activities	Yes

Excluding those processed under the exception provisions within the scope of Articles 5/2 and 6/3 of the Personal Data Protection Law No. 6698; I hereby give my consent, with my free will, being aware of all the meaning and consequences of this statement and future possible results, for the processing of my personal data that is not subject to the exception provisions, limited to the processing and transfer purposes, parties to which the data is transferred, and legal reasons specified in the informative text, sharing/transferring them with third parties domestically and/or abroad for legal reasons or due to the nature of the transaction, keeping them for the period required for the purpose they are processed or as specified in the relevant law, and destroying them after the retention period has expired / I do not give my consent.

Data Subject			
Name Surname: Date: Signature:	I consent. I do not consent.		