

Request form

Requester	Name: Surname: Address: Phone: E-mail: Preferred method of communication:
Relation to P.I.Works	<input type="checkbox"/> Employee / relative of the employee named <input type="checkbox"/> Former employee /relative of the former employee named <input type="checkbox"/> Job Applicant <input type="checkbox"/> Employee or Representative of the Customer / Vendor / Business Partner titled <input type="checkbox"/> Visitor <input type="checkbox"/> Other(Please explain)
Request	
Per the Article 11 of the Law on Protection of Personal Data numbered 6698 (“ Law ”), I hereby consent to P.I. Works processing the data I provide in this application.	
Date Signature	
To be filled by P.I.Works Employee	Name: Surname:
*This Request form should be filled out and sent to marketing@piworks.net	