

CLARIFICATION TEXT AND EXPLICIT CONSENT DECLARATION REGARDING THE PROCESSING OF PERSONAL DATA OF ERASMUS AND ERASMUS + APPLICANT

Hereby clarification text was drawn up pursuant to the Article 10 of the Law No. 6698 on the Protection of Personal Data (“**Law**”) and the Communique on Principles and Procedures to be Followed in Fulfillment of the Obligation to Inform by **Istanbul Kent University (“Kent”)** as data controller, in the framework of Erasmus and Erasmus+ Program Coordination, for the purpose of informing with regards to the personal data collected during (pre-selection) in-house applications and (post-selection) external nominations/applications.

Your data on your disability, special needs required by your disability level/type, your data whether you or a first degree relative of yours receive invalidity pension or financial aid from the state/Non-Governmental Organization and whether you are a relative of a martyr/ veteran or if you are veteran, will be processed in accordance with your explicit consent with partially automatic and non-automatic means by Kent according to the criteria set by the Turkish National Agency in the in-house selections and the application of plus points, for the purposes of informing authorized persons, institutions and organization and the execution of the contractual processes, and again for the same purposes on the basis of your explicit consent, your data will be physically stored in the Erasmus+ and International Programs Office, it will be stored and processed on the online portal used by Erasmus+ International Programs Office, it will be stored, processed and reported in the Mobility Tool online portal, which is used to submit interim and final reports to the Turkish National Agency in project periods, and will be transferred abroad to be processed and stored under Digital Erasmus Initiative / Erasmus without Papers whose servers are located abroad.

Your disability, disability level and special needs required by your disability type/level will also be transferred to foreign universities/institutions in the post-selection nomination and application processes; to the relevant universities/institutions located in a foreign country.

I accept and declare that I have been informed thoroughly and entirely without leaving any doubt on my part by Kent on this issue and that I have given my explicit consent in accordance with the Law and my preference stated below, that I have confirmed of my free will that my personal data in this context can be stored and processed for the maximum required period and due dates of expiration, on condition that it is limited to the indicated purposes.

	I've read, understand and accept it all.	I do not accept.
Receiving financial support from State / Non-Governmental Organization or or his/ her first-degree relative receives financial support from State / Non-Governmental Organization	<input type="checkbox"/>	<input type="checkbox"/>

Being a relative of a martyr and / or veteran	<input type="checkbox"/>	<input type="checkbox"/>
Being a veteran	<input type="checkbox"/>	<input type="checkbox"/>
	I've read, understand and accept it all.	I do not accept.
Disability type, disability level and special needs required by disability type/ level	<input type="checkbox"/>	<input type="checkbox"/>

Name	
Surname	
Date	
Signature	