REPUBLIC OF TÜRKİYE MINISTRY OF TRADE

Application Form For International Buyer Mission Program

- Please type your answers and return this participation form to the Turkish Commercial Counselor. Formal acceptance will be given to you by Turkish Commercial Counselor as soon as eligibility is cleared by Ministry of Trade.
 - Application forms must be returned by [29/09/2023].
 - Please indicate whether any of the information you have provided is confidential.

(1)_Ministry of Trade External Demands Database.

Details shown at 1 to 8 will automatically be used to create an entry on Ministry of Trade External Demands Database.

If you do not want details of your organization to appear on Ministry of Trade External Demands Database, please tick here.

- (2) Name of the Company:
- (3) Status of the Company:

Please tick,

- Manufacturer Importer Retailer Manufacturer-Importer Wholesaler Chain Store Other (please specify)
- (4) Company Address (Please include postcode)

(5) Company representative who will attend to the Program and Position

(6) Name of parent or holding Company (if applicable)

(7) Brief description of goods and/or services imported from all over the World.

(8) Detailed description of goods and/or services demanded from Türkiye.

(9) Total number of employees and year of count?

1-10 10-50 50-100 More Than 100

(10) What is the company's annual turnover and year of count? (Optional)

(11) What is the sum of your total annual imports?

in years 2021 and 2022 (world-wide)?

(12) What is the value of your annual imports from

Türkiye and year of count?

(13) How many times has your company visited Türkiye?

- On Ministry of Trade Buyer Mission Program
- Independently?

(14) Are any of your objectives in participating in this mission represented by the following?

CategoriesYesNoImport from TürkiyePreliminary research into Turkish marketPreliminary research into Turkish marketSeeking a representativeMeeting new suppliersMeeting existing representatives/ SuppliersPartners for manufacture under
Licence or joint venture

If other, please give details

Yes No

(15) Do you have any local contacts or representatives in Türkiye? If "Yes" please give the following details Name & Address

Type of Contact: Su

Subsidiary

Associate Company Commission Agent