

# TOKL Cashback Program Application Form

Please, fill all fields in a form in English, so we can process your application faster.

Date	<input type="text"/>
First name	<input type="text"/>
Last name	<input type="text"/>

Would you like to hide your name from public view? ☐

In this case, please, tell us your nickname.

Occupation	<input type="checkbox"/> High school student	<input type="checkbox"/> Hobby
	<input type="checkbox"/> Student/PhD student	<input type="checkbox"/> Other
	<input type="checkbox"/> Professional	

Country	<input type="text"/>
Province, territory or state	<input type="text"/>
City	<input type="text"/>
Email	<input type="text"/>

If you have participated in past, please, give us your TOKL number(s)

## Tell us more about your experiment

Title of an experiment	<input type="text"/>
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Application	<input type="checkbox"/> Archeology	<input type="checkbox"/> Chemistry	<input type="checkbox"/> Medicine
	<input type="checkbox"/> Astronomy	<input type="checkbox"/> Gemology	<input type="checkbox"/> Other
	<input type="checkbox"/> Art	<input type="checkbox"/> Food and beverages	
	<input type="checkbox"/> Biology	<input type="checkbox"/> Physics	

Purposes of the experiment	<input type="text"/>
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Description of experimental setups	<input type="text"/>
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### Thunder Optics instruments used for the experiment.

If there is more than one instrument, please, set the one you are clime for the cashback program and all others list in the Other section.

<input type="checkbox"/> Raman Spectrometer	<input type="checkbox"/> Mini USB Spectrometer	<input type="checkbox"/> Other
<input type="checkbox"/> Raman Microscope	<input type="checkbox"/> R-Spectrometer	
<input type="checkbox"/> Raman System	<input type="checkbox"/> Cuvette holder	
<input type="checkbox"/> Raman Probe	<input type="checkbox"/> Halogen Light Source	
<input type="checkbox"/> SMA Spectrometer		

Main results of experiment	
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Device serial number	
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Date of purchasing	
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If your application is accepted for the TOKL Cashback Program what is your preferred way to receive your Cashback (PayPal, Credit Card).	
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In case your application is NOT accepted for the TOKL Cashback Program, do you give your permission to publish your work in TOKL?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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## Feedback

What do you like about our instrument(s)?	
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We would appreciate your recommendations, suggestions so we may improve our products and services.	
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What is your experience with other brands?	
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I confirm that the information entered in the TOKL Cashback Program application and the documents provided are accurate to the best of my knowledge.

I give my consent to Thunder Optics to share information in this application and attached materials with their customers and for use in PR and/or marketing materials.  
I understand that the copyright for the experiment belongs to me only.  
I understand that after receiving cashback, I will not be able not cancel my application.  
I understand that the information provided in my application is considered confidential and the information will only be used to administer the TOKL Cashback Program and will be protected as such.

By checking the box and entering my name below, I certify that this serves as my official signature.

Name	<input type="checkbox"/>	
Date		