**Reviewer Application form**

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| --- |
| Basic Information |
| Journal Title(Mention the journal title you want to join) |  |
| ISSN(Mention the journal issn you want to join) |  |
| Date of starting the Review task |  |
| How many reviews would you like to make per month? |  |
| Areaa of interest |  |

|  |
| --- |
| Applicant’s Information |
| First Name |  | **Last Name** |  |
| Gender |  | **Country Name** |  |
|  Position or Title | Dr. -Professor \_Assistant Professor \_Lecturer \_Senior Lecturer \_ Associate Professor \_PhD Student\_Post-doctoral Fellow \_Staff Scientist \_Engineer \_Research Scientist \_Librarian\_Head of Academic Department/Faculty |  |
| Affiliation with any University or any institution |  |
| Professional email address |  |
| Phone No. |  | Cell phone(if any) |  |
| Fax No.(if any) |  |
| Postal Address |  |
| Postal Address 2 |  |
| WorkingExperience |  |
| Education |  |
| Membership of Institutions, Associations and other Editorial Board |  |
| Publications |  |

**Policy and Declaration**

**Privacy Policy**

We guarantee for the privacy of the information given above. We will use this information for journal editorial board and will not share with others.

**Applicant’s Declaration**

Submitting this application form means you confirm the information given above is correct and original.