

Application Form for Reviewers

Please fill up the form.

1. Name	
2. Date of Birth (DD/MM/YYYY)	
3. Qualification	
4. Experience(75 words)	
5. Current designation and Institution	
6. Area of Specialization	
7. Address	
8. State	
9. Country	
10. Email Id	
11. Mobile no.	

I, Mr. /Ms. hereby offer my consent to become a part of the panel for **reviewers**. I shall actively participate in the journal by contributing articles and reviewing them from time to time.

Date:

Signature:
