

## **Advisory Board**

**It gives us immense pleasure to welcome you for joining the Advisory Board of SNI publications. It is anticipated that your association with us will not only improve the quality of scientific publications but will also help us to improve the journal's standards by providing continuous feedback and suggestion for the betterment of the SNI Publications.**

**Kindly read all Terms & Conditions stated below and fill the form to join our Advisory Board.**

- **By accepting the listed terms and conditions you shall be appointed as Advisory Board Member after successful approval from the SNI Publications for the term of 24 months which shall be extended upon the support received from you with respect to the improvement and betterment of the journal/publisher.**
- **By this agreement, you accept and approve that all ideas, enhancements, and developments regarded by you in the performance of your service shall be the assets of SNI Publications.**
- **Advising on the selection of autonomous, explicit topics and new research dimensions in order to increase the scope of the journals.**
- **Furnishing your expert opinion on emerging, illustrating, and authenticating novel and prevailing research metrics, indicators, and research assessment practices.**
- **Providing continuous audits and feedbacks on the journal/publisher policies which are subject to change with the course of time.**
- **Introducing the journals/publisher to the subject matter experts also, convince them to join the Editorial Board of the journal.**
- **Willing to contribute at least one article in each volume of the journal related to your research area to be published without any financial obligation.**
- **You shall also provide your input in recruiting reviewers in order to build a strong reviewer board.**
- **By accepting this agreement you agree to non-financial obligation as we do not provide any remuneration for the Advisory Board.**

**Advisory Board**

Honorific.....

First Name.....Last (Family) Name.....

Contact Number..(.....).....

E-mail.....

Country.....Province.....

Affiliation.....

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- ❖ I have read all terms and conditions for Advisory Board of SNI Publication and by signing this form I agree to abide by them in the best possible way.
- ❖ I declare all the information stated in the form is true to the best of my knowledge and belief.

(Signature)..... Date...../...../.....

(Full Name).....

Kindly fill the form and return it to SNI Publication either as an e-mail attachment or upload it in the self-nomination portal.