

## Associate Editor

It is a great pleasure to invite as an Associate Editor of the Journal. It is anticipated that your vital contributions will lead to achieving the journal's overall goal of becoming an outstanding interdisciplinary forum for the dissemination of research findings and development. By accepting the appointment, your name will appear in the member list of the "Associate Editor" of the respective journal.

An Associate Editor is one who has sufficient knowledge and rigor to independently judge manuscript thus contributing a novel strength to the editorial board. EIC delegates work to these editors and may deputize some decisions to them. An associate editor plays a key role in the success of any scientific journal where he/she will be responsible to manage an article review, inviting scientific and methodological reviewers, further monitoring their performance. Moreover, Associate Editor establishes and grows specialty by ensuring that the publication maintains the highest quality while adhering to the journal publication policies.

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

- Willing to submit an inaugural article in the first few months.
- Analyze the manuscript before sending it out for review.
- Ensuring the quality of papers for acceptance.
- Selection of suitable reviewers and formation of reviewer board.
- Ensuring timely peer-review process.
- Provide authors guidance on how to address the reviews.
- Making suggestions on themed special issues.
- When in doubt, choose the more severe recommendation.
- Forming the final decision.
- Promoting the journal through your networks.
- Return unsatisfactory revisions to the authors.
- Encourage and invite relevant manuscript submissions.

## Associate Editor

Honorific.....

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

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

E-mail.....

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

Affiliation.....

Area of Specialization.....

Name of Journal.....

- ❖ I have read all terms and conditions for Associate Editor for 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 and best as per my knowledge.

(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.