

Author(s) Consent for Manuscript Submission

This letter is to confirm the agreement of all author(s) that the manuscript entitled

 submitted for publication to the SNI Publication in the (intended journal name)

 has been read and approved by all author(s). We the undersigned qualify as authors
 to this manuscript and warrant that nobody who qualifies for authorship has been
 excluded. This manuscript contains original material. Ethical approval has been
 sought and obtained as necessary and any conflicts of interest stated.

Kindly read all Terms & Conditions stated below along with on www.snipub.com for manuscript submission.

- The submitted article nor any part of its essential substance, tables, figures, data, etc. has not been submitted to other journal(s) for publication.
- If the article is accepted for publication, it will not be published in any other national or international scientific or medical journal(s).
- As author(s) we transfer the copyrights of this manuscript to the journal.
- I/We have disclosed the conflict of interests, funding source and ethical permission.
- After submission of this agreement signed by the corresponding author, changes of authorship or in the order of the authors listed will not be accepted.
- I/We agree that I/We have read the Author Guidelines, Article Processing Charges (APC), Withdrawal Policies, Peer-Review Process, Open Access Policies and other relevant guideline on the SNI Publication website.

Author(s) names and Affiliation

Signatures

.....
.....
.....
.....
.....
.....

(Electronic signatures will be considered valid for all articles submitted using the online article submission services).

Author(s) Consent Letter for Manuscript Submission

(Details of Corresponding Author)

Honorific.....

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

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

E-mail.....

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

Affiliation.....

.....

Name of Intended Journal.....

- ❖ I have read all terms and conditions for Authorship 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...../...../.....

(Corresponding Author).....

Kindly fill the form and return it to SNI Publication either as an e-mail attachment or upload along with the manuscript online.