**A. MANUSCRIPT INFORMATION**

|  |  |
| --- | --- |
| Manuscript Number |  |
| Manuscript Title |  |
| Manuscript Category  |  |
| Review Reports Due Date |  |

**B. MANUSCRIPT REPORT:** *Kindly fill the details of the reviewed manuscript in this section.*

|  |  |
| --- | --- |
| **Title**: *Is the title of the manuscript appropriate? Please comment and add suggestion (if any)* |  |
| **Abstract**:*250 word maximum, and should address background of the study, aim, methodology, results, and conclusion* |  |
| **Introduction**:*Justification and aim of the study should be addressed* |  |
| **Methodology**: *Appropriate and logically arranged* |  |
| **Results**: *Appropriately presented and represented methodology with well-cited tables and figures* |  |
| **Discussion**: *Appropriately discussed the results* |  |
| **Conclusion**: *Addressed the aim of the study* |  |
| **References**: *Appropriate and up-to-date citations and follows journal’s format* |  |
| Does the manuscript represent a quality scientific presentation? If NO state the reason(s)  |  |
| Does the article contribute to scientific knowledge? |  |
| General comments on the manuscript |   |
| General Score of Manuscript (%) |  |

**C. RECOMMENDATION**

*Kindly* *mark check in the appropriate box*

|  |  |
| --- | --- |
| **Accept as it is** |  Yes [ ]  No [ ]   |
| **Requires Minor Revision** |  Yes [ ]  No [ ]   |
| **Requires Major Revision** |  Yes [ ]  No [ ]   |
| **Rejection** (Please provide reasons) |  Yes [ ]  No [ ]   |

**D. REVIEWER’S INFORMATION**

*for confidential use only*

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| **Full name** (with prefix) |  |
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| **Phone** |  |
| **Date of Review** |  |