

MANUSCRIPT REVIEW FORM

Manuscript ID:

Please give your valuable suggestions to Author (s) or explain reasons for rejection

Manuscript Title:

Type of Article:

Assigned Date:

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Please answer **Yes/No** to the following questions and add further comments as appropriate

The manuscript falls under the scope of journal	Ye s	Is the abstract correlates with the manuscript content	No	The problem significant and concisely stated	Yes
The experimental and/or theoretical work described expansively	No	The discussion and conclusions justified by the results of the study	No	References, language, grammar are acceptable	Yes

Suggestions to the Author (s)

Decision
Accept Minor Revision Major Revision Reject Revisions