

REVIEWER APPLICATION FORM

Part I: Basic Information	
Beginning date of review work	dd--mm—yyyy
How many reviews would you be able to do per month?	
How much time do you need in order to schedule and complete a review?	days
Subject areas you are interested in	

Part II: Information about Applicant			
Name of Applicant			
Gender		Country	
Position or Title			
Organizational Affiliation			
1 st E-mail			
2 nd E-mail	(optional)		
Phone		Cell phone	
Fax	(optional)		
Postal Address			
Working Experience			
Education			

Membership of Institutions, Associations and Editorial Board	
Publications	
Additional Information	

Privacy

- All information you have given in this form will only be used for selecting reviewers for the journal. We guarantee this information will be not used for any other purpose.

Declaration

- Submitting this form means that you guarantee the information you have given is truthful, complete and correct. The furnishing of false or misleading information on this form may result in criminal sanctions and/or civil sanctions.
- Applicant as a reviewer not claims to any type of payment for reviewing the articles.
- Applicant accepts all policies design by IJREST and time to time modified policies by IJREST.

Name and Sign of Applicant