**Application Form - Publication Funds**

Name:

Department:

Rank and Title:

Date of Application:

Anticipated Date of Publication:

Date Payment Due:

Title of Publication:

Name of Journal or Publisher:

Scope of Journal: (check all that apply) □Regional □ National □International

|  |  |
| --- | --- |
| Publication Costs | |
| Page Charges |  |
| Reprints (100 maximum) |  |
| Other Costs |  |
| Total |  |

Justify Costs:

How was this research funded?

Who should the publication payment be made out to?

*Tick as appropriate*

□ Attach invoice and a separate page describing the probabilities of royalty accruement if applicable.

□Attach "information to contributors" from the publisher.

□Attach abstract of manuscript.

Declaration:

I certify that this is a reputable, refereed (peer reviewed) publication of scholarly work in this discipline.

Applicant Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Comments of the Program

Program Coordinator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Endorsement of Research Office

□ Approved

□ Not approved

Signature of Director of Research Office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_