**Project Monitoring and Evaluation Cell**

**भाकृअनुप–राष्ट्रीय पशुरोग जानपदिक एवं सूचना विज्ञान संस्थान**

 **ICAR–National Institute of Veterinary Epidemiology and Disease Informatics**

**(ISO 9001: 2015 Certified)**

**Proforma VR**

**Proforma to be submitted to PME Cell by author(s) for forwarding research manuscript for publication in research journals with Article Publication Charges**

Date:……………

**To**

The Director,

ICAR-NIVEDI,

Bengaluru-64.

**Subject:** Submission of Competent Authority approved Research Manuscript for publication in scientific journals with **Article Processing/Publication Charges (APC)**.

**Sir,**

I/we are/am enclosing herewith Competent Authority approved the manuscript of an original scientific research article entitled “…………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………..” with a request that permission may kindly be granted for submission of the same in the “…………………………………………………………………………………………………….”Journal /national/international/with **Article Processing/Publication Charges (APC)**. I hereby certify that the information given for each of the items listed below is correct.

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| --- | --- | --- |
| **S.No.** | **Item** | **Particulars** |
|  | The article/paper/manuscript is based on bona fide research and/or miscellaneousobservations conducted in the Institute and is related to mandated activities as perdetails below. Yes / No |
|  | Project title:Project Ref. No. (PME code):Type of project:. |
|  | Title/Topic/Name of the activity/objectives of the institute /External funded project of which the publication is an output.: |
|  | Whether the manuscript has been approved by the competent authority for submission for publication in research journals. If yes, provide the CA approval copy | Yes/ No |
|  | Whether the submitted article is a review paper.  | Yes /No  |
|  | No. of the article submitted/approved for the current financial year with APC either as corresponding author / First Author  | Corresponding Author-First Author-  |
|  | Impact factor of Journal (Latest) in which article to be published and sought for APC.\* |  |
|  | A.Thomson Reuters (latest) Impact factor of the journal, in which manuscript to be submitted…(having >2.86 international impact factor)  | Yes/ No |
|  | B.NAAS Journal Impact factor of the journal (latest), in which manuscript to be submitted…(having Latest Year NAAS IF >8.86 ) | Yes/ No |
|  | Source of funds for the APC to the submitted article/manuscript if accepted- Institute/External Project.  | External Project- Yes /NoInstitute Project-Yes/No |
|  | if the source of fund is from external project, make sure the availability of funds for the APC, Consent form obtained from the Principal investigator of the project may be submitted….please indicate name and project code. | Yes/ No |
|  | Whether the research paper will be submitted by the undersigned Corresponding Author or First Author.  | Yes/No |
|  | Whther the soft copy of the complete full research paper/manuscript has been submitted to PME for evaluation of the publication screening committee  | Yes/ NoIf yes, indicate the date of email submission to PME cell. |
|  | Whether Non-payment option explored for the submitted research paper in international / national journal | Yes/No |
|  | The attempt has been made for availing the maximum discount claim for the APC from the journal. | Yes/ No |
|  | whether maximum discount obtained from the journal indicating the % and ­if, No. specify the reason … | Yes/ No |
|  | State the Final amount to be paid to the publisher in USD/GBP/INR/ etc., after discount  |  |
|  | Required documents proof listed in the checklist are attached (Annexure V) | Yes/No |
|  | Whether the submitted research article was based on the research work as reflected in the objectives of the approved project. If no. provide reason for that… | Yes/No |

The information given above by me is correct to the best of my knowledge and belief.

I --------------------------------------------------- as corresponding Author/First Author will explore the APC amount from the external project initially, if not available then I may approach to institute funds. Further, the copy of the accepted and published article in the journal, will be submitted to the PME cell for office record. Furthermore, copy will be submitted to the Administration and Account Section for making necessary payment towards APC for the accepted article based on the Invoice (in favour of the Director, ICAR-NIVEDI, Bengaluru, Karnataka, India) provided by the author.

Signature with name and designation of Corresponding/first Author

Signature of available Co-authors, if any

Recommended /Not-recommended and forwarded by the Publication Committee

Details of the comments attached in separate sheet with duly signed by all the members of PC.

(Signature of the Chairman, PC )

Recommended and forwarded by the PME Cell In-charge

(Signature of the PME Cell In-Charge)

Approval of the Head of the Institute / Director

(Signature of the Director of the Institute)

**Annexure-V R**

**Project Monitoring and Evaluation Cell**

**भाकृअनुप–राष्ट्रीय पशुरोग जानपदिक एवं सूचना विज्ञान संस्थान**

 **ICAR–National Institute of Veterinary Epidemiology and Disease Informatics**

**CHECKLIST**

The following documents/reference are required for forwarding/processing of the submitted research manuscript for publication in scientific research journals with APC\*

|  |  |  |
| --- | --- | --- |
|  **S. No** | **Documents/Reference** | * **Tick**
 |
|  | Duly signed and completed research paper submission proforma for publication in scientific research journals with Article Publication Charges by the Corresponding /First Author. |  |
|  | The complete full research paper/manuscript including Figures and Tables submitted in soft copy  |  |
|  | Competent Authority Approved letter for the publication of the same research paper in national/internal journals |  |
|  | Thomson Reuters/NAAS Impact factor of the journal in which article to be published should be > 8.86 NAAS IF or 2.86 International IF-copy to be enclosed. |  |
|  | Proof for the explored option for non-payment option journal and Editor suggestion of the payment journals -copy to be enclosed. |  |
|  | Proof of the attempt made for the maximum discount claim for the APC- copy to be enclosed |  |
|  | Source of funds for the APC to the submitted article/manuscript if accepted, - copy to be attached for ongoing nature of the project in which APC to be claimed. |  |
|  | Proof for the non-availability of the funds under External project if claiming for the funds from Institute Project.- copy to be enclosed |  |

 *\* The incomplete application without the required checklist, will not be processed further at PME Cell of ICAR-NIVEDI.*

 **Signature of Corresponding/First Author**

**OFFICE USE (PME Cell) Only**

Date of Receipt of application as per register in PME Cell………………….Provided Ref. No. ...................

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| --- | --- | --- | --- | --- |
| **S. No.** | **Documents/Reference submitted by Author(s)** | * **Verified by PME Cell tick**
 | **Remarks/****Comments** | **Signature of the Verified officer**  |
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|  | Recommendation of the Publication Committee |  |  |  |
|  |  |  |  |  |

Date of submission/circulation of soft copy of article to the PC:

Signature of Incharge

Report of the PC received from the Chairman of PC:

Date of submission/put up of file to the CA /Director Cell:

Signature of PME Cell Incharge

Date of receipt of the file from the CA /Director Cell:……………………..

Date of clearance from PME Cell:……………… PME Cell Ref. No. with date:………………………..

Source of Funds:

Project Name:

APC Amount:

Communication date:

Soft copy through Email/ Hard copy: to the author……………………………….

With a copy to Officer in cahrge for Admin and Account section, ICAR-NIVEDI

Signature of PME Cell Incharge