



International Journal of Innovative Pharmaceutical Sciences and Research

www.ijipsr.com

E-mail: editorijipsr@gmail.com

Website: www.ijipsr.com

DECLARATION AND COPY RIGHT FORM

Manuscript I.D No:

Type of Manuscript: (put a tick mark)

Original Article / Review Article

Manuscript entitled:

In reference to the above, I as a corresponding author, submit the manuscript for publication in international journal of innovative pharmaceutical sciences and research (IJIPSR). I believe the manuscript represents valid work. I have reviewed the final version of manuscript and approve it for publication. All Authors agree that the contents of the manuscript are confidential and will not be copyrighted, submitted, or published elsewhere (including the Internet), in any language, while acceptance by the Journal is under consideration. Kindly consider the manuscript for publication in your journal.

I declare no conflict of interest. I accept all the terms and conditions displayed in www.ijipsr.com to the best of my knowledge.

Corresponding author Name & Signature **Name/Signature:**

Co-authors Name & Signatures:

| Sl. NO | NAME OF AUTHOR | SIGNATURE | DESIGNATION |
|--------|----------------|-----------|-------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

After completion of this form, please email the scanned file of original signed form to:
editorijipsr@gmail.com