

Authors' Degrees and Contact Information

Name of article:

In the space provided below, for each author indicate the name (first name, middle initial, last name; or first initial, middle name, last name if commonly known by the middle name), as it will appear with the article.

Also provide institutional affiliation, department affiliation if applicable, and country of the institution. Additional contact information, such as address and phone number, is optional. *An email address should be provided for the corresponding author.*

Also list for each author, if applicable, the correct professional degree and highest earned academic degree (eg, MS, PhD, MPVM). A bachelor's degree should be listed only if it is the author's only degree. Academic degrees lower than the bachelor's degree (eg, associate degrees), fellowship designations, and honorary degrees should not be listed. If an author has a doctorate degree (PhD), master's degrees should typically not be included. Exceptions may be made when the master's degree represents a specialized field or a field different from that represented by the doctorate (eg, DVM, PhD, MPVM). Do not list specialty board certifications or any other certifications.

Corresponding author:

Name and degree(s): _____

Institutional affiliation: _____

Department affiliation if applicable: _____

Country of institution: _____

Email address: _____

(Optional) Full address, phone #:

As submitting author, I certify that the degrees provided above have been earned by each author, and are accurate and current according to all applicable laws, rules, and regulations.

Signature: _____

Date: _____

Additional authors:

Name and degree(s): _____

Institutional affiliation: _____

Department affiliation if applicable: _____

Country of institution: _____

Name and degree(s): _____

Institutional affiliation: _____

Department affiliation if applicable: _____

Country of institution: _____

Name and degree(s): _____

Institutional affiliation: _____

Department affiliation if applicable: _____

Country of institution: _____

Name and degree(s): _____

Institutional affiliation: _____

Department affiliation if applicable: _____

Country of institution: _____

Forms should be emailed to Shelley Epstein: 4epsteins@comcast.net.