

TRANSFER OF COPYRIGHT AGREEMENT

Manuscript ID:

Title of Manuscript:

Corresponding Author Name:

Address/Affiliation:

E-mail: **Contact No.**

Name of Co-Author(s) with Affiliation and Signature:

1.

2.

3.

4.

The Authors acknowledged that:

- ✓ I hereby declare that the above mentioned manuscript submitted for publication in the International Journal of Recent Research in Pharmacy is not under considered elsewhere and the data is an original work and truly compiled by me/us.
- ✓ Author/s agree that above content of the manuscript will not be copyrighted, submitted, or published somewhere else, and is also not copied from elsewhere, while acceptance by the journal is under consideration.
- ✓ I/we will consent to publish in International Journal of Recent Research in Pharmacy in any medium such as print, electronic etc. and transfer copyright agreement to the International Journal of Recent Research in Pharmacy.
- ✓ I confirm that the information contained in the manuscript is authentic and, under any circumstances, I / We shall be responsible for any dispute that may arise in the future.

Date:

Signature

Place:

(Corresponding Author)