

Form for the Assessment of Contribution in a Collaborative Research Publication

This form is **to be completed by the Corresponding Author only**^{1,2,3,4}.

1. **Name of the Applicant for Promotion:**

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2. **Name of the Applicant's Department:**

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3. **Full Citation of the Publication No.() (Author, Title, Journal, Vol., Pg., Year):**

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4. Please **rate the contribution of the applicant in this publication** in the following areas by checking one of the options in each of the four categories:

Nature and Extent of Contribution	Significant (40- 50%)	Moderate (20% or more but less than 40%)	Modest (10% or more but less Than 20%)	Minor (Less than 10%)	Not Applicable
Identification of Research Idea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Execution of Experimental/ Theoretical Work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Data Analysis and /or Computations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Write-up	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Details and Signature of the **Corresponding Author:**

Name:

Title(Rank):.....

Affiliation:.....

Signature: **Date:**.....

¹There is no need to fill out this form if the applicant for promotion is the sole author of the publication.

²If the Journal does not specify the corresponding author; the first author needs to fill out and sign this form.

³If there are multiple corresponding authors, the one listed first in the authorship order must fill out and sign this form.

⁴if the applicant is not the corresponding author, this form must be handled confidentially by the Chairman of the Department Promotions Committee.