



~ NEW REVIEWER FORM ~
Expression of Interest to Act as Peer Reviewer
for Trivent Publishing

Title: _____ Name: _____

Affiliation: _____

Address: _____

Email: _____

Research areas:

- 1.
- 2.
- 3.
- 4.

Comments:

Declaration of consent:

I hereby acknowledge that I have read and understood the [COPE Ethical Guidelines for Peer Reviewers](#) and agree to adhere to these standards while peer reviewing for Trivent Publishing.

Date:

Signature: