# Description: http://www.groupin.pk/blog/wp-content/uploads/2011/07/Bahria_Logo.png

**APPLICATION FORM FOR PAYMENT OF**

***PUBLICATION FEE***

**Section – I**

*(To be filled by the Faculty Member/Researcher/Student)*

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| **PERSONAL DETAILS *(IF THE APPLICANT IS FACULTY MEMBER / RESEARCHER)*** | |
| **Name** |  |
| **Designation** |  |
| **Highest Academic Qualification** |  |
| **Year of Qualification** |  |
| **Name of highest degree awarding institution** |  |
| **Department** |  |
| **Campus/Institute** |  |
| **Phone/Cell** |  |
| **Email** |  |

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| **PERSONAL DETAILS *(IF THE APPLICANT IS STUDENT/SCHOLAR OF BU)*** | |
| **Name** |  |
| **Enrollment No.** |  |
| **Date of Enrollment** |  |
| **Degree** |  |
| **Program** |  |
| **Title of Research Thesis** |  |
| **Semester** |  |
| **Department** |  |
| **Campus/Institute** |  |
| **Phone/Cell** |  |
| **Email** |  |

**JOURNAL PUBLICATION DETAILS**

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| **Paper Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| **Journal Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |
| ***Published Research Paper uploaded on Research Web Portal?* □ Yes □ No**  ***Note:*** *It is the mandatory requirement to upload the details of published Research Paper (which is being applied for publication fee) on Research Web Portal by the faculty member before processing the case, the uploaded paper will be verified from the portal and then the case file for publication fee will be processed further.* | | |
| **Type of journal:** □ ISI indexed with impact factor Journal  *(Included in both current/updated JCR and ISI Master Journal List)* | | |
| **Authors’ Information** *[please write name of BU Author(s) first]* | | |
| **S. No.** | **Author Name** | **Affiliated University / HEI** |
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| **Proof of payment attached:** □ **Yes** □ **No**  *Author/applicant must attach the proof of payment with application form for payment of publication fee, if the payment has been paid by someone else on behalf of the applicant, then the clarification may also be provided below that why applicant did not pay the publication fee himself/herself?*  ***Clarification, why applicant did not pay the publication fee himself/herself?*** | | |
| **Volume: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Issue: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Page no(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Article ID** *(in case of an online journal)***: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **DOI[[1]](#endnote-1) of the Article:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **Date of Publication***:* **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **Journal research area: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *(For Pure/Applied/Technological, etc.)* | | |
| **Name, order, affiliation(s), and contribution(s) of co-author(s)/corresponding author(s)** *(If any):*  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_* | | |
| **Last known impact factor:** *(impact factor journal) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  *Please attach the documentary evidence (from Journal’s Website/ISI Web of Knowledge) of Impact Factor.* | | |
| **Amount of publication fee** *(in foreign currency):* **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Amount in PKR. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Dollar/ any other foreign currency rate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *(What rate did you use to convert foreign currency into PKR on a particular date? Also, attach the proof of currency rate from internet on that particular date).* | | |
| **Official address of the publisher** *(to whom the publication fee has been sent/paid):*  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **Mode of Payment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | |
| **ISSN Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *(Print/Electronic)* | | |
| **URL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  *(URL of online version of research paper (for verification)).* | | |

***Instructions for the faculty member/author:***

***(i)*** *Hard Copy of the* ***“Published Paper”*** *must be attached.*

***(ii)*** *Faculty member/author must check the plagiarism of his/her research paper through plagiarism detection software Turnitin and attach the* ***“Plagiarism Check Report****.” In case of similarity index is* ***>19% of overall and >5% from one source****, the faculty member must separately explain each match (e.g. in case the paper was extension of conference paper or else it was part of a submission checked earlier via Turn-it-in etc.).*

***(iii)******Co-author(s):*** *Name (s) should be mentioned from first three co-author (s) of Bahria University in Section – II. Only first three authors of publication are eligible for publication fee reimbursement.*

***(iv)*** *Author (s) must enlist his/her/their contributions in publishing the paper.*

***(v)*** *The applicant must attach an updated CV.*

***(vi)*** *Please attach the documentary evidence (from Journal’s Website/ISI Web of Knowledge) of Impact Factor.*

***Undertaking:*** *I certify the following to the best of my knowledge:*

***(i)*** *This journal is a renowned impact factor journal in my researcher/academic area of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I certify that I have personally confirmed that this impact factor journal is listed in the Thomson Reuters Master Journal list.*

***(ii)*** *I certify that none of the author(s) is a ghost or gifted author as defined by the Committee On Publications Ethics (COPE).*

***(iii)*** *In case, something contrary to my statement is discovered subsequently, I happily allow Bahria University to take action to recover the publication fee amount, after giving me a reasonable due notice and a fair chance to explain my stance.*

***For PhD Scholar only:***

*The research paper titled \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ has been published in the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_journal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Vol, Issue/DOI \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ date of publication, is not considered as my mandatory PhD degree requirement. The publication which is applied for Publication fee is subsequent to my mandatory research paper degree requirement.*

**Applicant Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Applicant Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| |  | | --- | | **Section - II**  **Undertaking from BU authors**  *(This section is only required if author(s) are amongst first three authors of Bahria University faculty/researchers/students)* | | Claim this publication fee as (Please tick only one): **1. Faculty Member 2. Supervisor 3. Scholar**  (Supervisor must attach official evidence of supervision of co-authors)  **1st Author**  **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact (cell): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Campus: \_\_\_\_\_\_\_**  **Signature: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **2nd Co- Author:**  **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact (cell): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Campus: \_\_\_\_\_\_\_**  **Signature: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **3rd Co- Author:**  **Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Contact (cell): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Designation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Campus: \_\_\_\_\_\_\_**  **Signature: \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |

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| **Section-III**  *(To be filled by the Head of Department)* | |
| **ENDORSEMENT BY THE HEAD OF DEPARTMENT** | |
| **Dr./Mr./Ms. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is a**  **regular faculty member/currently enrolled student of \_\_\_\_\_\_\_\_\_department of\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Campus/Institute/College.** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature & Official Stamp**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Section-IV**  *(To be filled by the Principal/Director)* | |
| **ENDORSEMENT BY THE PRINCIPAL/DIRECTOR** | |
| **Comments** *(if any):* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature & Official Stamp**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **Section - V**  *(To be checked/filled by the Directorate of Quality Assurance, BUHO)* | | | |
| **S. No.** | **Contents to be checked** | **Yes** | **No** |
| **1** | Is the IF Journal present in the *Thomson Reuters Master Journal List* | 🞏 | 🞏 |
| **2** | Is the IF Journal present in the last/recent/updated JCR | 🞏 | 🞏 |
| **3** | Is the IF journal listed in *“*Title Suppressions Journals list” | 🞏 | 🞏 |
| **4** | Has the website of the journal (Using the DOI of the paper) aligned to the official website of the journal/hard-copy of the journal? | 🞏 | 🞏 |
| **5** | Have all required and mentioned details as part of this entire form been provided? These include duly filled form in addition to the final corrected version of the author proof/research paper provided by the publisher (in hard copy). | 🞏 | 🞏 |
| **6** | Is the ‘Plagiarism Check Report’ along with explanation of matches attached with the application form in case similarity index is > 19% | 🞏 | 🞏 |
| **7** | Is the author’s affiliation clearly mentioned in the research paper as **“Bahria University”** | 🞏 | 🞏 |

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| **RECOMMENDATION(S) BY THE DIRECTOR QUALITY ASSURANCE** | |
| 🞏 **Recommended** 🞏 **Not Recommended**  🞏 **Resubmit the case in view of the following comment(s)**  ***Recommendation(s)/Comment(s):*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature & Official Stamp**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **RECOMMENDATION(S) BY DIRECTOR ORIC** | |
| 🞏 **Recommended** 🞏 **Not Recommended**  🞏 **Resubmit the case in view of the following comment(s)**  ***Recommendation(s)/Comment(s):*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Signature & Official Stamp**  **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

1. [↑](#endnote-ref-1)