



FORM - 30B

APPLICATION FOR OPEN ACCESS REIMBURSEMENT

1.	Name of the applicant	Dr./ Mr. / Ms.:
2.	Designation	
	Dept. / Section / Centre	
3.	Title of the research article	
4.	Full name of all the authors, Name of the journal and Publisher	
5.	DOI number	
6.	Impact factor	
7.	Quartile of the journal (Q1, Q2) (https://www.scimagojr.com/journalr ank.php)	
8.	Corresponding author (Yes/No)	
9.	Open access fee (in Rs.)	
10.	Acceptance letter attached	YES/NO

I, (Name of the faculty) hereby confirm that the above said journal is a high quality journal in my field of expertise and it is not a predatory journal.

Date : _____

Signature of the Applicant

Emp_No.: _____

I (HoD/HoC) hereby confirm that the above said journal is a high quality journal in the field of expertise of the Department/Centre.

Signature

Date: _____

Head, Dept./Section/Centre: _____

FOR OFFICE USE

As per the recommendations of the Head of the Department/Center the open access fee full/partial Rs.
can be reimbursed from Competent Authority.

Signature of the dealing officials

Approval of Sanctioning Authority:

Signature of the Sanctioning Authority

Enclosures:

1. Hard copy of the publication
2. Hard copy of the acceptance letter
3. Credit/Debit card/bank transfer receipts
4. Receipt of the open access fee from the journal