**COVERING LETTER**

To,

The Editor,

National Journal of Community Medicine

**Sub:** Submission of Manuscript for publication

Dear Sir,

We intend to publish an article entitled **“\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ”** in your esteemed journal as an “\_\_\_\_\_\_\_\_\_\_\_”.

On behalf of all the contributors I will act and guarantor and will correspond with the journal from this point onward.

On behalf of all the authors, I would like to provide following information/statements:

1. **Conflict of interest statement form** ([Download](https://njcmindia.com/index.php/file/libraryFiles/downloadPublic/67)): To be signed by all authors. Print the document and fill it up. Ask each author to sign it and upload the scanned document. Attach or upload covering letter and this conflict-of-interest statement form along with your manuscript text document.
2. **Funding Support**:
3. **Approval of Institutional Ethical Review Board** (with name of board & approval letter number)
4. **Acknowledgement** (if any):
5. **Individual Authors’ Contributions:**
6. **Availability of Data:**
7. **No use of generative AI tools**

We hereby agree to abide by the copyright policy of the journal in the event that such work is published by the journal.

We would like to suggest following referees (with email id) for this article.

|  |  |  |  |
| --- | --- | --- | --- |
| **Reviewer** | **Name** | **Designation** | **Email Id** |
| 1 |  |  |  |
| 2 |  |  |  |

Thanking you,

Yours’ sincerely,

<**Corresponding author>**

Name:

Email:

**TITLE PAGE**

Type of article: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title of the article:

**Contributors**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Sr. No. | Name | Department | Institute | City, Country | Email |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Note: 1) All the information in the above table is compulsory.

2) Same email for two authors will not be accepted.

3) Authors’ designation will ***NOT***be published in the final version.

**Corresponding Author:**

|  |  |
| --- | --- |
| Name: |  |
| Postal Address: |  |
| City: |  |
| Country: |  |
| Pin code: |  |
| Mobile No: |  |