**e-IJCMR Revision Form**

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| Manuscript Information |
| Manuscript ID: |  |
| Manuscript Title: |  |
| Date Received from Journal: |  |
| Date to Send Revision Report: |  |

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| *Letter to Reviewers….* |

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| **REVIEWER 1** | **Describe specific Revisions** | **Justify Specific Revisions** |
| **Reviewer’s Comment** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |

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| **REVIEWER 2** | **Describe specific Revisions** | **Justify Specific Revisions** |
| **Reviewer’s Comment** |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |