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**OFFICE OF RESEARCH, INNOVATION**

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**Article Processing Charges**

**Funding Request Form**

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| **I. Personal Information** |
| **Full Name of the Applicant** |  |
| **Designation** | [ ] Faculty Member [ ] Research Associate[ ] Research Student |
| **Department** |  |
| **Contact Information** | * **Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
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| **II. Publication Information** |
| **Title of the Article** | **Journal Name** | **HEC Journal Category** |
|  |  |  |
| **Author Status**  | [ ] 1st Author[ ] Corresponding Author[ ]  Both |
| **Name and affiliation of all other Authors (If any)** |  |

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| **III. Funding Request Detail** |
| **Total Article Publication Fee (APC) Amount in PKR****(Specify the amount requested for Publication)**  |  |
| Fee Waiver/Reduction Status from the Publisher(Have you requested the fee waiver from the Publisher?) | [ ] **Yes**[ ] **No****(If no, please explain why a waiver or reduction was not requested)****(If yes, please attach proof in case of rejection)** |

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| **IV. Case for Choosing a Paid Journal over Free Options** |
| (Provide a justification for why you have chosen to publish in a paid journal instead of submitting to a free journal) |

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| V. Additional Information |
| Have you ever applied for or received funding from any other source for this publication fee?(If yes, please provide details of the funding source and amount received) | [ ] Yes[ ] No |

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| VI. Any other Relevant Information |
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**Acknowledgment & Agreement:**

* I confirm that I am the 1st Author or Corresponding Author of the publication.
* I confirm that the journal in which I am publishing is HEC Recognized, and I have ensured it falls within the specified categories (X/W).
* I acknowledge that conference papers and book editing fees are not eligible for this funding unless specified by the ORIC department on a case-by-case basis.

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**Signature of the Applicant**

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**Date**