

# Change of Authorship Form

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**(Must be completed and signed by ALL authors)**

Please check all that apply

\_\_\_\_ New author(s) have been added (in addition to this form, all new authors must complete the copyright transfer agreement and conflict of interest disclosure.

\_\_\_\_ Change in order of authorship.

\_\_\_\_ An author wishes to remove his/her name. An author's name may only be removed his/her own request and a letter signed by the author should accompany this form

**Manuscript Number** \_\_\_\_\_

**Manuscript Title** \_\_\_\_\_

## Former Authorship

Please list ALL AUTHORS in the same order as the original submission. For more than 12, use an extra sheet.

### Print Name


Name (1) \_\_\_\_\_  
Name (2) \_\_\_\_\_  
Name (3) \_\_\_\_\_  
Name (4) \_\_\_\_\_  
Name (5) \_\_\_\_\_  
Name (6) \_\_\_\_\_

### Print Name

Name (7) \_\_\_\_\_  
Name (8) \_\_\_\_\_  
Name (9) \_\_\_\_\_  
Name (10) \_\_\_\_\_  
Name (11) \_\_\_\_\_  
Name (12) \_\_\_\_\_

## New Authorship

All authors must sign below agreeing to the changes in authorship. The authorship order must reflect the authorship order of the manuscript.

Name (1) _____	Signature _____	Date _____
Name (2) _____	Signature _____	Date _____
Name (3) _____	Signature _____	Date _____
Name (4) _____	Signature _____	Date _____
Name (5) _____	Signature _____	Date _____
Name (6) _____	Signature _____	Date _____
Name (7) _____	Signature _____	Date _____
Name (8) _____	Signature _____	Date _____
Name (9) _____	Signature 	Date 4Dec2018
Name (10) _____	Signature _____	Date _____
Name (11) _____	Signature _____	Date _____
Name (12) _____	Signature _____	Date _____

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