

UP State Journal of Otolaryngology and Head and Neck Surgery

Covering Letter for Authors for Manuscript Submission

To, **Dr. Sumit Sharma.**
Editor, UP State Journal of Otolaryngology and Head and Neck Surger
Address: 401, kalian Apartments Sector – 24, Indira Nagar, Lucknow – 226016
Contact Number: 9839178240 / Email: entsumit@rediffmail.com / www.entsumit.com

Subject: Submission of my / our manuscript entitled
Category For publication in UP State Journal of Otolaryngology and Head and Neck Surgery

Dear Sir,
I am submitting my / our manuscript entitled
“.....
.....
.....”

Category.....

For publication in UP State Journal of Otolaryngology and Head and Neck Surgery on your official email upaoijournal@gmail.com.

With regards

UP State Journal of Otolaryngology and Head and Neck Surgery

Copyright Transfer Form for Authors for Manuscript Submission

Title of Manuscript

Authors:

Date of Submission:

Dear Sir,

- We would like to have the manuscript considered for publication in your Journal.
- I/ We confirm that this work is original and has not been published elsewhere, nor is it currently under consideration for publication elsewhere.
- My submission is as per the Journal guidelines.
- We have no conflicts of interest to disclose.
- Please address all correspondence concerning this manuscript to me / us at the below mentioned address
- With this letter the copyright to this article is being transferred to the Up State Journal of Otolaryngology and Head and Neck Surgery.
- Thank you for your consideration of this manuscript.

Please let me know of your decision at your earliest convenience.

With my best regards,

Sincerely yours,

S.No.	Author	Signature	Date signed

