**REVIEWING FORM**

|  |  |  |
| --- | --- | --- |
| **Name of author:** | NAME SURNAME OF AUTHORS | |
| **Title of the paper:** | TITLE OF THE PAPER | |
| **Reviewing system** (filled in by reviewer)**:**  **1** – excellent (accept)  **2** – very good (accept with the minor corrections)  **3** – average (accept with the major corrections)  **4** – fair (accept only after corrections and repeated review)  **5** – poor (reject) | | |
| **Criterion** | | **Score** |
| Title | |  |
| Abstract | |  |
| Scientific importance of thematic | |  |
| Originality | |  |
| Tables, Figures, Equations | |  |
| Citations | |  |
| References | |  |
| **Final recommendation** | |  |
| **Additional comments and explanations:** | | |
| -XXXXXXX | | |

Date of paper review: X.XX.2019