



Peer Review Evaluation Scorecard

Section 1: Manuscript Details

Manuscript ID:

Title of Manuscript:

Article Type:

- Research Article
- Review Article
- Short Communication
- Case Study
- Others

Reviewer ID:

Date Manuscript Received for Review:

Review Completion Date:

Section 2: General Evaluation Criteria

Please rate the manuscript using the following scale:

1 = Very Poor | 2 = Poor | 3 = Average | 4 = Good | 5 = Excellent

| Evaluation Parameter | Rating (1-5) | Reviewer Remarks |
|--|--------------|------------------|
| Originality and Novelty of Research | | |
| Relevance to Journal Scope | | |
| Quality of Research Methodology | | |
| Literature Review and References | | |
| Data Analysis / Interpretation | | |
| Clarity of Writing and Language | | |
| Organization and Logical Flow | | |
| Scientific / Academic Contribution | | |
| Ethical Compliance | | |
| Integrity of Cultural/Heritage Context (if applicable) | | |



Section 3: Detailed Reviewer Comments

A. Major Strengths of the Manuscript

(Highlight key contributions and innovative aspects)

B. Major Concerns or Weaknesses

(Identify methodological issues, theoretical gaps, or missing references)

C. Specific Suggestions for Improvement

(Provide constructive recommendations for improving the manuscript)

Section 4: Technical Assessment

Please evaluate the following aspects:

| Parameter | Yes | No | Comments |
|---|--------------------------|--------------------------|----------|
| Abstract clearly summarizes the research | <input type="checkbox"/> | <input type="checkbox"/> | |
| Research objectives are clearly defined | <input type="checkbox"/> | <input type="checkbox"/> | |
| Methodology is appropriate and well explained | <input type="checkbox"/> | <input type="checkbox"/> | |
| Results are supported by evidence | <input type="checkbox"/> | <input type="checkbox"/> | |
| Figures/Tables are clear and relevant | <input type="checkbox"/> | <input type="checkbox"/> | |
| References are adequate and recent | <input type="checkbox"/> | <input type="checkbox"/> | |



Section 5: Ethical Compliance Check

| Ethical Parameter | Yes | No |
|--|--------------------------|--------------------------|
| No evidence of plagiarism detected | <input type="checkbox"/> | <input type="checkbox"/> |
| Ethical approval mentioned (if applicable) | <input type="checkbox"/> | <input type="checkbox"/> |
| Conflict of interest declared | <input type="checkbox"/> | <input type="checkbox"/> |
| Data authenticity appears reliable | <input type="checkbox"/> | <input type="checkbox"/> |

Section 6: Confidential Comments to the Editor

(This section will not be shared with authors)

Section 7: Final Recommendation

Please select **one** option:

- Accept without revisions
- Accept with minor revisions
- Major revisions required
- Reject

Section 8: Reviewer Declaration

I confirm that:

- I have **no conflict of interest** regarding this manuscript.
- I agree to maintain **confidentiality** of the manuscript and the peer review process.
- My review is **objective and based on academic standards**.

Reviewer Name: _____

ORCID ID (16-digit): _____

Reviewer Signature: _____

Date: _____

Note:

If additional space is required for detailed comments or suggestions, reviewers may attach a separate sheet or additional document.