

SUBMISSION FORM FOR ÖAW SERIES EDITORS

| Name of the ÖAW series: | : | |
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| C E 14 | | |
| Series Editors: | | |
| Name: | | |
| Phone: | | |
| E-Mail: | | |
| Author or editor and full | title of manuscript: | |
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| Suitability of the manusc | ript for publication in the above series: | |
| Yes, the manuscript is suitable for publication in the above series. The | | |
| initiation of the review is approved. | | |
| The manuscript is suitable for the above series subject to the following additions or corrections: | | |
| (Note: After making the additions or corrections, the work can be released for review). | | |
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| | | |
| The manuscript fits into the Please give reasons for your statem | e program of another series. | |
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| Proposal for series: | | |
| | | |
| No, the manuscript is not s | uitable for publication by the ÖAW publishing house. | |
| Please give reasons for your statem | ient. | |
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| | | |
| Date Signature | of the series editor ¹ | |

1 The signature of the series editor does not necessarily imply a funding commitment by the Institute.

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