# Authorship Change Statement

## A. Article Information

Paper ID
Article title
Author(s)
DOI
Date of Publication
Corresponding Author
Current Author List

## B. Requested Authorship Change

We, the undersigned authors, hereby request a change to the authorship of the above-mentioned published article.

Type of authorship change:

- Addition of an author
- Removal of an author
- Change in author order
- Other: _____

Please provide the proposed author list after the change:

| No. | Proposed Author Name | Affiliation | Email |
|---|---|---|---|
| | | | |
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## C. Reason for the Authorship Change

Please provide a clear explanation of the reason for the requested authorship change:

For a **removal of an author**, please explain specifically why the author should no longer be listed as an author and describe how the authorship criteria/contribution of the concerned author have been considered.

If the requested change involves removal of an author, does the removed author allege fraud, misconduct, or another dispute concerning the research or authorship?

- No
- Yes; please explain

_____

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## D. Authorship Contribution

Author Contribution Form All authors must check* the relevant terms to indicate their contributions. To know more about the CReDiT Author Statement and definitions of each term mentioned in the below form, please visit https://casrai.org/credit/.

| **Term** | | | |
|---|---|---|---|
| Conceptualization | | | |
| Data curation | | | |
| Formal Analysis | | | |
| Funding acquisition | | | |
| Investigation | | | |
| Methodology | | | |
| Project administration | | | |
| Resources | | | |
| Software | | | |
| Supervision | | | |
| Validation | | | |
| Visualization | | | |
| Writing – original draft | | | |
| Writing – review & editing | | | |

* Use tick mark (✓) to indicate contribution, a cross (×) to indicate no contribution and NA where not applicable.

\# Use author initials to declare the contributions to the manuscript.

## E. Declaration and Agreement of All Authors

We, the undersigned authors, confirm that:

1. We have been informed of and have reviewed the proposed change in authorship of the above-mentioned published article.
2. We confirm that the proposed authorship change and the reason stated in this form accurately represent our agreement concerning the authorship of the article.
3. We confirm that the proposed author list reflects the authorship contributions and/or authorship circumstances relevant to the published article.
4. We provide our written agreement to the requested authorship change

5. We understand that all authors, including an author whose name is proposed to be removed, are required to provide written agreement to the change, where applicable. This follows the COPE flowchart for removal of an author after publication.
6. We understand that JITeCS may request additional information or documentation concerning the proposed authorship change.
7. We understand that JITeCS will review the request and may require an appropriate correction to the published article if the authorship change is approved. COPE's flowchart indicates that a correction may be published after agreement has been obtained.
8. We confirm that the information provided in this form is complete and accurate to the best of our knowledge.
9. We understand that if the authors cannot reach agreement regarding the authorship change, JITeCS may not make the change until the matter has been appropriately resolved. In cases where agreement cannot be obtained, COPE recommends referring the matter to the relevant author institution(s) for adjudication.

## F. Author Consent and Signatures

All authors must sign this statement. For removal of an author, the author whose name is proposed to be removed must also sign this form.

| No. | Full Name | Role* | Signature | Date |
|---|---|---|---|---|
| 1. | | Current author | | |
| 2. | | Current author | | |
| 3. | | Current author / Proposed author | | |
| 4. | | **Author proposed to be removed** | | |

* Add or adjust the role as applicable.

## G. Additional Statement for an Author Proposed to be Removed

*To be completed only when an author is proposed to be removed after publication.*

I, _____, acknowledge that I have been informed of the request to remove my name from the authorship of the following published article:

**Article title:**

I confirm that:

☐ I agree to the removal of my name from the article's authorship.

☐ I have been given the opportunity to provide an explanation concerning the proposed removal.

My statement, if any:

Name : _____

## H. For Editorial Office Use Only

| Item | Editorial Office Record |
|---|---|
| Date request received | |
| Request submitted by | |
| Reason reviewed | ☐ Yes ☐ No |
| All authors contacted | ☐ Yes ☐ No |
| Written agreement from all authors received | ☐ Yes ☐ No |
| Agreement from removed author received, if applicable | ☐ Yes ☐ No ☐ N/A |
| Institutional involvement required | ☐ Yes ☐ No |
| Institutional decision/document received | ☐ Yes ☐ No ☐ N/A |
| Correction required | ☐ Yes ☐ No |
| Correction published | ☐ Yes ☐ No ☐ N/A |
| Date of correction | |
| Editorial decision | |