📄 Form 2: Peer Reviewer Evaluation Form

The African Nexus Quarterly
Peer Review Report

Manuscript ID: _____
Manuscript Title: _____
Reviewer: _____
Date of Review: _____

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1. Overall Evaluation

- Originality: ☐ Excellent ☐ Good ☐ Fair ☐ Poor
- Relevance to journal: ☐ Excellent ☐ Good ☐ Fair ☐ Poor
- Methodology: ☐ Excellent ☐ Good ☐ Fair ☐ Poor
- Clarity of writing: ☐ Excellent ☐ Good ☐ Fair ☐ Poor
- Use of literature: ☐ Excellent ☐ Good ☐ Fair ☐ Poor

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2. Major Strengths

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3. Major Weaknesses

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4. Suggestions for Improvement

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5. Ethical Concerns

☐ None
☐ Possible plagiarism (explain)
☐ Other (please specify): _____

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6. Recommendation

☐ Accept without revisions
☐ Accept with minor revisions
☐ Accept with major revisions
☐ Reject

Reviewer's Confidential Comments to Editor:

Reviewer's Comments to Author:

Signature / Name: _____
Date: _____