

Participation Form

<i>Corresponding Author (full Name)</i>	
<i>Faculty</i>	
<i>Department</i>	

<i>Title:</i>
<i>Journal:</i>

The authors' participation for financial purpose ⁽¹⁾

No.	Author Name	Percentage of Participation	Signature
(1)		%	
(2)		%	
(3)			
(4)			
(5)			

Dean

Prof. Dr. Fathi Farouk

⁽¹⁾ The information has to be filled for Authors from Cairo University ONLY