

## Manuscript Withdrawal Form

**Manuscript Title:**

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**Reasons for Withdrawing the Manuscript:**

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**Name(s), Surname(s), and Affiliation(s) of the Author(s) (in the order they appear in the manuscript):**

Title	Name-Surname	Affiliation	Signature

**On behalf of all authors as the corresponding author:**

- 1- I acknowledge that I cannot submit our work to another journal for evaluation unless the withdrawal request is approved.
- 2- I accept and undertake to cooperate with the editorial board/editors during the withdrawal process.

**Corresponding Author:**

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Phone:		E-mail	@