

---

The Journal of  
Adhesive Dentistry

MANDATORY SUBMISSION FORM

Title of article: \_\_\_\_\_

**A signature below certifies compliance with the following statements:**

**Copyright transfer.** In consideration of the acceptance of the above work for publication, I do hereby assign and transfer to Quintessence Publishing Company all rights, title, interest in and copyright to the above-titled work. This assignment applies to all translations of said article as well as to preliminary display/posting of the abstract of the accepted article in electronic form before publication. If any changes in authorship (order, deletions, or additions) occur after the manuscript is submitted, agreement by all authors for such changes must be on file with the Publisher. An author's name may be removed only at his/her request. (Note: material prepared by employees of the US Government in the course of their official duties cannot be copyrighted.)

**Author responsibilities.** I attest that:

The manuscript is original work without fabrication, plagiarism, or fraud;

The manuscript is not currently under consideration elsewhere and the research reported will not be submitted for publication elsewhere unless a final decision is made by the Journal that the manuscript is not acceptable;

I have made a significant scientific contribution to the study and I am thoroughly familiar with the primary data outlined in the manuscript;

I have read the complete manuscript and take responsibility for the content and completeness of the final submitted manuscript and understand that if the manuscript, or part of the manuscript, is found to be faulty or fraudulent, I share responsibility.

**Conflict of interest disclosure.** All institutional or corporate affiliations of mine and all funding sources supporting the work are acknowledged. Except as disclosed in the separate enclosed letter, I certify that I have no commercial associations (eg, consultancies, patent-licensing arrangements, equity interests) that might represent a conflict of interest in connection with the submitted manuscript (letter attached).

**Experimental procedures in humans and animals.** The Journal endorses the principles embodied in the Declaration of Helsinki and insists that all investigations involving human beings reported in articles in the Journal be carried out in conformity with these principles and with similar principles such as those of the American Physiological Society, eg, see J Neurophysiol 1997;78(6). In the case of animal experiments reported in the Journal, these should also conform to these latter principles or with analogous principles such as those of the Canadian Council on Animal Care or The International Association for the Study of Pain. In articles reporting experiments involving surgical procedures on animals, the type and dosage of anesthetic agent used must be specified in the Materials and Methods section, and evidence must be provided that anesthesia of suitable grade and duration was achieved. Authors reporting on their experimental work in humans or animals should also cite evidence in the Materials and Methods section of the article that this work has been approved by, respectively, an institutional clinical/human experimentation panel or an institutional animal care and use panel (or equivalent). The editor-in-chief and associate editors are expected to refuse articles in which there is no clear evidence that these principles have been adhered to, and they reserve the right to judge the appropriateness of the use of human beings and animals in experiments reported in articles submitted to the Journal.

**Signature of each author required in the same order as on the manuscript title page** (Fax signatures, multiple forms are acceptable). For more than 5 authors, use an extra sheet.

Signature (1) \_\_\_\_\_ Print name \_\_\_\_\_ Date \_\_\_\_\_

Signature (2) \_\_\_\_\_ Print name \_\_\_\_\_ Date \_\_\_\_\_

Signature (3) \_\_\_\_\_ Print name \_\_\_\_\_ Date \_\_\_\_\_

Signature (4) \_\_\_\_\_ Print name \_\_\_\_\_ Date \_\_\_\_\_

Signature (5) \_\_\_\_\_ Print name \_\_\_\_\_ Date \_\_\_\_\_

**Corresponding author** \_\_\_\_\_ **Mailing address** \_\_\_\_\_

Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_