AUTHOR REGISTRATION REQUIREMENTS FOR ZJNNP

1. Personal Information

Full Name (as it should appear in publications)

Title (e.g., Dr., Prof., Mr., Ms.)

Gender

Date of Birth

2. Contact Details

Primary Email Address (used for all correspondence)

Alternative Email (optional)

Phone Number (optional, for urgent editorial contact)

3. Institutional Affiliation

Current Position/Title (e.g., Consultant Neurosurgeon, Assistant Professor)

Institution/Organization

Department

Country

Institutional Address

4. Academic and Professional Information

Degrees/Qualifications (e.g., MBChB, MMed, PhD, Bsc)

ORCID iD (required)

Scopus Author ID (optional)

ResearchGate/Google Scholar Profile (optional but helpful)

Areas of Expertise

5. Submission Preferences

Would you like to be considered as a **reviewer**? (Yes/No)

Would you like to receive calls for papers or editorial updates? (Yes/No)

6. Compliance Acknowledgement

Conflict of Interest Statement (agree to disclose for all submissions)

Data and Ethical Compliance (agree to uphold research and publishing ethics)

Acknowledgement of Journal Policies (open access, editorial, copyright)