Copyright Form

of

Psychiatry and Clinical Psychopharmacology

We undersigned:
(Name(s) of author(s)):

Agree and undertake that the Psychiatry and Clinical Psychopharmacology has no the article titled responsibility about
(Title of the article):

until it is received by them,

I (we), undersigned, agree and undertake that the article submitted by author(s) follow(s) all the ethical designs, is original, is never submitted to another journal to be published, and that cases where a part or the whole of the article is published, necessary permission is guaranteed for the article to be published in the above mentioned bulletin and that the article is forwarded to the Advisory Board of the Psychiatry and Clinical Psychopharmacology with the copyright form filled. Furthermore, we agree and undertake to hand: All the registered rights, except copyright, such as license; the right to use the whole or part of the article for the future books or lessons of the author(s) without any cost and the right to reproduce the article for personal use, except for the purpose of selling it, over to the Psychiatry and Clinical Psychopharmacology.

Name, Surname: ........................................................... signature: ....................... date : ....../....../

Name, Surname: ........................................................... signature: ....................... date : ....../....../

Name, Surname: ........................................................... signature: ....................... date : ....../....../

Name, Surname: ........................................................... signature: ....................... date : ....../....../

Name, Surname: ........................................................... signature: ....................... date : ....../....../

Name, Surname: ........................................................... signature: ....................... date : ....../....../

Name, Surname: ........................................................... signature: ....................... date : ....../....../

Correspondence address:

Phone: .................. Fax: .................. E-mail address: ..........................