**PROOFREADING 사후지원 신청서(타업체 교정)**

**Application for PROOFREADING Support (Other Agencies)**

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| **신청자****(연구책임자)****Applicant****(chief researcher)** | 소 속 Affiliation | 전 공 Academic Major | 성 명 Name | **교원사번**Employee no. |
|  |  |   |  |
| 주 저 자소속정보Affiliation of main author(s) | 제1저자(First author) | 교신저자(Corresponding author) | Division of applicants | 제1저자First author | ( ) |
| 본교Yonsei University ( ) | 타기관External institution( ) | 본교Yonsei University( ) | 타기관External institution( ) | 교신저자Corresponding author | ( ) |
| 신청 대리인(연구원)Application proxy (researcher) | 성 명 Name | E-MAIL | 연 락 처(휴대폰) Contact (cell) |
|  |  |  |
| **논문제목****Paper title** |  |
| 투고예정학술지명Name of journal  |  | ISSN. No. | － |
| 발행기관명Name of Publisher |  | 투고예정월Submission date |  (month) (year) |
| 투고예정학술색인Journal index | 학진등재후보Registration Candidate with KRF | 학진등재Registration with KRF | 일반국제International & non-SCI/SCIE/SSCI/A&HCI  | SCI | SCIE | SSCI | A&HCI |
| ( ) | ( ) | ( ) | ( ) | ( ) | ( ) | ( ) |
| 환급정보Refund information | 교정실경비(신청금액)Proofreading fee (amount requested)  | 수취계좌정보Account information | 교정업체명Proofreading agency |
|  | 은행명Bank Name |  | 계좌번호Acc. No. |  |  |
|  ※ Reason for using an external agency ※ Required documents to attach (1) Application form and copy of proofread document(s) (2) Agency invoice. Proof of bank transfer (confirmation receipt, etc). |

 연세대학교 연구진흥사업 지원기준에 의거 위와 같이 proofreading을 지원 받고자 관련서류를 첨부하여 신청합니다. I hereby submit my application with the enclosed documents in order to receive financial support for proofreading in accordance with the Yonsei University Research Promotion Project Guideline.

Day Month Year

 Applicant: (signature)

**PROOFREADING 교정 후 평가의견서**

**PROOFREADING Evaluation Form**

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| **관리번호** **Management no.** |  | **교정업체****Proofreading agency** |  |

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| --- | --- | --- | --- |
| **신청교원****(연구책임자)****Applicant (chief researcher)** | 소 속 Affiliation | 전 공 Subject | **교원사번 Employee no.** |
|  |  |  |
| 성 명 Name | 연 락 처 Contact  | E-mail |
|  |  |  |
| **대리인(연구원)****Proxy (researcher)** | 성 명 Name | E-MAIL | 연 락 처(휴대폰) Contact (cell)  |
|  |   |  |
| **논문제목****Paper title** |  |
|  \* 아래의 평가항목별 만족도를 표시하여 주시기 바랍니다. Please rate your level of satisfaction with the following statements using the scale below. |
| 평가항목Item | 매우만족(5)Extremely satisfied | 만족(4)Satisfied | 보통(3)Average | 불만족(2)Unsatisfied | 매우 불만족(1)Extremely unsatisfied |
| 교정기간Proofreading Time |  |  |  |  |  |
| 문법적요소Grammar |  |  |  |  |  |
| 흐름적요소Readability |  |  |  |  |  |
| 수정된표현Revised Expressions |  |  |  |  |  |
| 기타 평가의견Miscellaneous comments |  \* 상세한 평가의견을 부탁드립니다. Please include as much detail as possible.  |

 (Day) (Month) (Year)

 Applicant: (signature)