



## Authorship Declaration Form

Manuscript Title:

.....  
.....  
.....  
.....

I, the undersigned Corresponding Author, hereby declare that all listed authors have read and approved the final version of this manuscript and agree to its submission to the Medox Journal of Public Health (MJPH). I confirm that the work is original, has not been published previously in whole or in part, and is not under consideration for publication elsewhere. I further confirm that all applicable ethical standards have been observed and that the information provided in this submission is accurate to the best of my knowledge. I am signing this declaration on behalf of all co-authors.

Corresponding Author Name:

.....

Signature: .....

Date: .....

OF PUBLIC HEALTH