

TRANSLATION REQUEST DECISION

(To be filled out by ANR Spanish-Language Materials Associate Editor)

This translation request has been reviewed by the following ANR Associate Editors or subject matter experts:

Name: _____ Date: _____

Name: _____ Date: _____

Name: _____ Date: _____

_____ This translation request has been denied by ANR Associate Editors. See attached comments.

_____ This publication needs major revision and a separate peer review before it is translated. See attached comments.

_____ This publication needs minor adaptation before it is translated. See attached comments.

_____ This translation request has been approved by ANR Associate Editors. The material is ready for translation.

DATE: _____

(Spanish-Language Materials Associate Editor):

Submit this Translation Request Decision form and the English publication and/or materials to be translated to:

Ann Senuta
Publications Manager
University of California
ANR Communication Services
1850 Research Park Dr., Ste. 200
Davis, CA 95618

I have received this material as approved for publication.

ANR Pub. No. _____ Date: _____

(Communication Services publications manager)