

Reviewer Agreement Form

I agree to be a Reviewer for PathologyOutlines.com. I have read the Instructions for Reviewers/Editors at <http://www.pathologyoutlines.com/Instructionsforreviewers.html> and I consent to follow them. I am prepared to execute the following responsibilities:

- Ensure that the topic contains material necessary for or interesting to practicing pathologists
- Correct any substantive errors or text that is incomplete or difficult to understand
- Update each topic with new information and new references (at least 3-5 references preferred including case reports)
- Add images (my own, or links to other free webpages, at least 2 gross/clinical images (if applicable) and 2 micro images preferred per topic)
- Send back the completed topics within 2 weeks of receiving them

Any images that I contribute will either be links to online images or images that I personally own. For my own images, I will release them to PathologyOutlines.com, granting permission for them to be used on the website.

I understand that my compensation is \$10/topic and will be paid when my reviewed material is posted on the website. For US residents, I acknowledge that PathologyOutlines.com will send a 1099 form to all who receive \$600 or more in a calendar year. For non-US residents, I understand that PathologyOutlines.com will withhold 30% of all payments, as required by US law, and forward these funds to the US government.

My contact information is:

Address

City, State, Zip

Country

Signature

Date

Print name

US Taxpayer ID / social security number
(if applicable)

Non US Taxpayer ID (if applicable)