Book Chapter Peer Review Feedback Form

Reviewer Name	
Date	
Date	
Chapter Title	
Author(s)	
	_
1. Summary of Chapter	
	_
2. Strengths of the Chapter	_
	_
3. Suggestions for Improvement	
	_
4. Clarity and Organization	
	_
5. Accuracy and Relevance	

7. Additional Comments		
Recommendation		
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