WWWCM’99 Paper Review Form

Paper number: __________
Paper title: _______________________________________________________
Authors: ___________________________________________________________
Program committee member: ___________________________________________
Referee’s full name (if different from PC member): _______________________
Confidential comments for committee use only:

Originality: ______  Significance of topic: ______
Technical quality: ______  Relevance to WWWCM'99: ______
Presentation: ______  Overall rating: ______

Referee’s expertise on topic (Low/Med/High): ______
Amount of rewriting required (Low/Med/High): ______

Comments To The Authors (Mandatory)

Main contributions:

Positive aspects:

Negative aspects:

Further comments:

(Rating Scale

0-3: Reject
4-5: Weak Reject
6-7: Weak Accept
8-10: Accept

(use additional space if necessary)