

# ACADEMY OF DECISION, INFORMATION, AND OPERATION SCIENCES (DIOS)

## CERTIFICATION APPLICATION

- ☐ New Certification  
☐ Renewal

Name: \_\_\_\_\_  
Last First Middle

If Renewal, Date of Last Certification: \_\_\_\_\_ DIOS # \_\_\_\_\_

Current Title: \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Email Address: \_\_\_\_\_

Company: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please use this form to report all activities during the five-year period from your last date of certification. Please keep a copy for your records and **either mail** the original to Director of Certification, AID, 22200 W. Eleven Mile Road, #200, Southfield, Michigan 48037 **or email** to [director@alphaiota delta.com](mailto:director@alphaiota delta.com)

**Continued certification as a certified academic member** in the decision, information, and operation sciences (DIOS) by the Academy can be achieved by a combination of experience, education and service. **This form** is to be used by current members who are certified and seek to apply for certification on the basis of activities during a 5-year period. Original forms with proper documentation for the 5-year period since the previous certification are required.

**Members in good standing are required to re-certify every five years to remain current.** The minimum requirement for consideration of certification is 75 credits. The Director of Certification will make decisions on the documentation presented and the credits allowed.

Please list only the experience, education and service activities that occurred during the 5-year period from your last date of certification. It is important that all relevant information be completed on this form with documented evidence provided. The Director of Certification may request additional documentation.

The Certification Committee has identified a wide variety of experience, education and service activities through which certification qualification can be earned. The Committee will continuously review the activities to identify changes in the fields that merit inclusion.

This submission period (last five years) is \_\_\_\_\_ through \_\_\_\_\_.  
Month, Year Month, year

Possible Credits (DELETE)

**Only one certification per application (evidence cannot be duplicated for another certification)**

**Certification applied for (check one)**

- the Decision Science and Analytics \_\_\_\_\_  
the Information, Systems, and Technology \_\_\_\_\_  
the Operations, Supply Chain, Logistics \_\_\_\_\_

**1. PROFESSIONAL MEMBERSHIP(S)** in the selected area of certification

**1 CREDIT/YEAR (Maximum 10)**

**Credit Claimed** \_\_\_\_\_

<u>Organizations</u>	<u>From (Mo/Yr)</u>	<u>To</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Notes/Comments Box

\_\_\_\_\_

**2. WORK EXPERIENCE** in the selected area of certification

**Up to 4 credits/YEAR (Maximum 20)**

**Credit Claimed** \_\_\_\_\_

<b>Employer</b>	<b>Title</b>	<b>From</b>	<b>To</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Notes/Comments Box

\_\_\_\_\_

**3. ACADEMIC/PROFESSIONAL CONFERENCE PARTICIPATION** in the selected area of certification

**2 credit/conference/seminar attendance (up to 5) + 2 credit/presentation/workshop delivery (up to 5)**  
**(Maximum 20 total)**

**Credit Claimed** \_\_\_\_\_

<b>Name of Conference</b>	<b>Location</b>	<b>Year</b>	Maybe radial buttons to check??	
			<b>Attendee Only</b> (Yes/No)	<b>Presented paper</b> (Yes/No)
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Attach registration and/or abstract/paper/presentation evidence to support claim(s) for these credits.

Decided we did not need international/national/local

Notes/Comments Box

\_\_\_\_\_

**4. PUBLISHED** Papers and Articles

**1 to 4 credits based on publication ranking/Article (Maximum 20)**

**Credit Claimed** \_\_\_\_\_

Each article or business paper published in the selected area of certification subjects.

<b>Title</b>	<b>Publication</b>	<b>Date</b>
--------------	--------------------	-------------


Articles or paper must be attached for evaluation by the Certification Committee, noting level of review.

Notes/Comments Box

5. **LEADERSHIP POSITIONS** in the selected area of certification

a. **National Leadership in positions such as Board of Directors, Officer, Committee Chair**

**1 credit/Year (Maximum 5)**

**Credit Claimed** \_\_\_\_\_

Organization	Position	Dates of Engagement	
		From	To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Attach appropriate documentation attesting to your service.

b. **Regional and Local Leadership in positions such as Board of Directors, Officer, Committee Member**

**1 credit/Year (Maximum 5)**

**Credit Claimed** \_\_\_\_\_

Organization	Position	Dates of Engagement	
		From	To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Attach appropriate documentation attesting to your service.

c. **Editor of Publication** in the selected area of certification

**1 credits/Year (Maximum 5)**

**Credit Claimed** \_\_\_\_\_

# based on area of certification. (Delete)

Publication	Years
_____	_____
_____	_____
_____	_____

Attach appropriate documentation attesting to your service.

d. **Referee/Reviewer for a professional journal or business magazine related to** the selected area of certification

**1 credit/Article (Maximum 5)**

**Credit Claimed** \_\_\_\_\_

Title	Date
_____	_____
_____	_____
_____	_____

Attach appropriate documentation attesting to your service.

---

Notes/Comments Box

---

**6. EDUCATIONAL PROGRESS** – Programs, Courses, and Training

**1/Credit Hour or CEU (1 CEU = 10 hours of contact) (Maximum 30)**  
**Credit Claimed** \_\_\_\_\_

Participation in formal education programs when the subject matter relates directly to the selected area of certification subjects.

<b>Institution</b>	<b>Hrs</b>	<b>Course</b>	<b>Year</b>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Provide evidence of completion should include an informal transcript or CEU certificate.

---

Notes/Comments Box

---

**7. PRESENTATIONS, SPEECHES, OR INSTRUCTION** in the selected area of certification related fields

**2 credits/Activity (Maximum 10)**  
**Credit Claimed** \_\_\_\_\_

Speaker or panel participant in the selected area of certification related educational/training program, workshop, or seminar.

<b>Seminar/Workshop/Training</b>	<b>Organization</b>	<b>Dates of Engagement</b>		<b>Role</b>
		<b>From</b>	<b>To</b>	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	
_____	_____	_____	_____	

Attach evidence to support claim for these credits.

---

Notes/Comments Box

---

**8. KEYNOTE SPEAKER/EXECUTIVE PRESENTATION** in the selected area of certification related fields

**2 credits/Event (Maximum 10)**  
**Credit Claimed** \_\_\_\_\_

# Please include the first cover page of the article.

Publication Title	Presentation Audience	Date	Organization	Cover Page
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Attach evidence to support claim for these credits.

Notes/Comments Box

\_\_\_\_\_

9. **AWARDS/RECOGNITION RECEIVED** for outstanding contributions and service in the selected area of certification  
**2 credits/Recognition/Award (Maximum 10)**  
**Credit Claimed** \_\_\_\_\_

- a. National, Regional, and Local Professional Recognitions/Promotions for Activities in the selected area of certification  
Deletions made

Award	Organization	Date
_____	_____	_____

- b. Service Awards From Other Professional or Community Organizations

Award	Organization	Date
_____	_____	_____

Attach a copy of each award for evaluation by the Certification Committee.

Notes/Comments Box

\_\_\_\_\_

**TOTAL CREDITS CLAIMED** \_\_\_\_\_

**PRINTED NAME** \_\_\_\_\_ **SIGNATURE** \_\_\_\_\_

**DATED** \_\_\_\_\_

Total Points Possible	Total Points Claimed	
1.    __10__	_____	Will these automatically populate from credits claimed??
2.    __20__	_____	
3.    __20__	_____	
4.    __20__	_____	
5.    __20__	_____	
6.    __30__	_____	
7.    __10__	_____	
8.    __10__	_____	

9.     \_\_10\_\_                     \_\_\_\_\_

Total     150                     \_\_\_\_\_

Certification in the Decision Science and Analytics     \_\_\_\_\_

Certification in Information, Systems, and Technology     \_\_\_\_\_DELeTe

Certification in Operations, Supply Chain, Logistics     \_\_\_\_\_

**FOR DIRECTOR OF CERTIFICATION USE ONLY. DO NOT WRITE**

PROFESSIONAL EVALUATION

TOTAL CREDITS CLAIMED \_\_\_\_\_

TOTAL CREDITS ALLOWED \_\_\_\_\_

RETURNED FOR ADDITIONAL INFO \_\_\_\_\_  
(date)

REVIEWED BY: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CERTIFICATION ACTION TAKEN:     Approved \_\_\_\_\_     Denied \_\_\_\_\_

ACTION COMPLETED \_\_\_\_\_  
Director of Certification