Application for Affiliate Institution/Organization Membership

AICE is a private membership organization. Affiliate applications must be approved to ensure eligibility criteria are met. All applications are subject to review and approval. AICE reserves the right to deny an application without explanation.

Check whether U.S. Academic Institution or Non-U.S. Academic Institution/Organization

☐ U.S. ACADEMIC INSTITUTION

Postsecondary: U.S. 2 and 4-year colleges, universities, and other postsecondary institutions

Check the appropriate box(es) and print clearly:

- □ Not-for-Profit
- □ For-Profit
- □ 2-Year
- □ 4-Year
- □ Public
- □ Private

Specify Accreditor: ________________________________________________

Institution Name: ________________________________________________

Address: _________________________________________________________

City _________________________ State_________ Zip Code _____________ Website _______________________________

☐ NON-U.S. ACADEMIC INSTITUTION or ORGANIZATION

Postsecondary: University and other postsecondary institutions of higher education or organization.

- □ Not-for-Profit
- □ For-Profit
- □ Public
- □ Private
- □ Government Organization
- □ Non-Governmental Organization

Institution/Organization Name: ____________________________________________

Address: _____________________________________________________________

City_____________________ State/Province _______________ Country__________________ Zip/Postal Code_____________

Website ______________________________
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**Name of Individual Applicant**

First Name ___________________________ Middle Initial __________ Last Name ___________________________

Preferred Pronoun □She/Her □He/Him □They/Them

Title/Position ______________________________________________________

Email __________________________________ Phone (work) __________________________ (mobile) __________________________

Please answer the following questions to help us learn more about you and your institution:

1. **Area of Responsibility & Interest (check all that apply)**
   - ☐ Academic Advising
   - ☐ Transfer & Articulation
   - ☐ International Credential Evaluation
   - ☐ Undergraduate Admissions / International Admissions
   - ☐ Graduate Admissions / International Admissions
   - ☐ Other (please specify): _____________________________________

2. **Does your institution or organization do evaluations of educational credentials in-house?** □ Yes □ No
   
   If NO, does your institution outsource its evaluations? □ Yes □ No

3. **Does your institution or organization use an AICE Endorsed Member credential evaluation service?**
   - □ Yes □ No
   - If YES, please specify: ____________________________________________________________

4. **AICE Affiliate Members are also invited to volunteer on working committees. Please specify which of the following committees you are interested in learning more about:**
   - ☐ Standards & Best Practices
   - ☐ Scholarship & Publications
   - ☐ Symposium Planning Committee

5. **Affiliate Membership with AICE allows you to participate in the monthly Credential Forum on the second Thursday of each month. Are you interested in learning more about the AICE Credential Forum?**
   - □ Yes □ No
   - If Yes, what topics interest you or your institution/organization? __________________________

Please read and sign below:

I have read the AICE Code of Ethics and the Benefits of Affiliate Membership as posted on the AICE website, and I agree to the terms and conditions therein:

Your Name: ______________________________________________________________________________________

Signature ___________________________ Date: ___________________________

Please return the complete form to AICE at info@aice-eval.org

Upon receipt and review of your form, the AICE Membership Committee will advise you of your Affiliate Membership eligibility. If you have any questions, please contact AICE at infor@aice-eval.org  (rev. 7/11/23)