



# 2024 AIS Bootcamp

May 21-22, 2024

Arlington, VA

## Continuing Professional Education Course Form

This is your Continuing Professional Education course form. Please complete this online form, print a copy for your records then submit to the American Accounting Association, email: [cpe@aaahq.org](mailto:cpe@aaahq.org), 9009 Town Center Parkway, Lakewood Ranch, FL 34202. Please allow 4-6 weeks to process.

Tuesday, May 21, 2024			CPE Credit Hours
8:00 am - 9:15 am	Opening Panel: AI: What's Next for the Profession	Accounting - 1.4 CH	
9:20 am - 10:30 am	Teaching Session #1: Incorporating AI into Teaching: Architecture, History and Its Possibilities: AI Architecture Basics for Accounting Students / History of AI	Accounting - 1.4 CH	
10:50 am - 12:00 pm	Teaching Session #2: AI Use in Accounting Information Systems	Accounting - 1.4 CH	
1:10 pm - 2:20 pm	Teaching Session #3: AI Use in Auditing	Accounting - 1.4 CH	
2:25 pm - 3:35 pm	Teaching Session #4: Ethical Issues in AI	Accounting - 1.4 CH	
3:55 pm - 5:05 pm	Teaching Session #5: AI Teaching Cases in EYARC	Accounting - 1.4 CH	
Wednesday, May 22, 2024			
8:00 am - 9:15 am	Panel 2: Use of AI in Corporate Environment (PCAOB?)	Accounting - 1.4 CH	
9:20 am - 10:30 am	Teaching Session #6: Fraud Detection/Forensics/ Prevention Using AI	Accounting - 1.4 CH	
10:50 am - 12:00 pm	Teaching Session #7: Cybersecurity Vulnerabilities with AI / how to audit AI / IT controls / impact of explainable AI	Accounting - 1.4 CH	
12:35 am - 1:45 pm	Teaching Session #8: Using ChatGPT to develop cases, assignments, and course syllabi	Accounting - 1.4 CH	
		<b>Total CPE Hours</b>	

**Total CPE Credit Hours** (Each Credit Hour is based on 50 Minutes)

Credit hours are recommended in accordance with the Statement on Standards for Continuing Professional Education (CPE) Programs. Your state board is the final authority for the number of credit hours allowed for a particular program. **AAA's NASBA Registry Sponsor number is 108313.** I certify that I attended the sessions indicated above.

Date: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Institution/Firm: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

AAA Member # \_\_\_\_\_ CPA Cert.# \_\_\_\_\_ State of Origin: \_\_\_\_\_ CMA Cert. # \_\_\_\_\_