AAR Personalization Requirement

Please print clearly. *Required information

This form should be used to:

1. change and existing requirements for this student:
2. delineate specific courses in a requirement which allows individual course selection: or,
3. add a new requirement to an area. This form should not be used to substitute one course for another. These types of changes should be documented on the SUBSTITUTION FORM.

When this AAR Personalized Requirement form is used, all courses for a requirement must be listed, because this information will replace the entire requirement as shown on the AAR.

Student Name (Last/ Family/ Surname, First/ Given, Middle)*

UW-Whitewater ID Number*   **Date of Request***

AAR Area: _____   **AAR Requirement:** _____   **Requirement Term:** _____

1) _____ _____   2) _____ _____   3) _____ _____

   Subject Area **Catalog No.**   **Subject Area** **Catalog No.**   **Subject Area** **Catalog No.**

4) _____ _____   5) _____ _____   6) _____ _____

   Subject Area **Catalog No.**   **Subject Area** **Catalog No.**   **Subject Area** **Catalog No.**

7) _____ _____   8) _____ _____   9) _____ _____

   Subject Area **Catalog No.**   **Subject Area** **Catalog No.**   **Subject Area** **Catalog No.**

10) _____ _____   11) _____ _____   12) _____ _____

   Subject Area **Catalog No.**   **Subject Area** **Catalog No.**   **Subject Area** **Catalog No.**

AAR Area: _____   **AAR Requirement:** _____   **Requirement Term:** _____

2) _____   _____   **2)** _____   _____   **3)** _____   _____

     Subject Area   **Catalog No.**   **Subject Area**   **Catalog No.**   **Subject Area**   **Catalog No.**

4) _____   _____   **5)** _____   _____   **6)** _____   _____

     Subject Area   **Catalog No.**   **Subject Area**   **Catalog No.**   **Subject Area**   **Catalog No.**

7) _____   _____   **8)** _____   _____   **9)** _____   _____

     Subject Area   **Catalog No.**   **Subject Area**   **Catalog No.**   **Subject Area**   **Catalog No.**

10) _____   _____   **11)** _____   _____   **12)** _____   _____

     Subject Area   **Catalog No.**   **Subject Area**   **Catalog No.**   **Subject Area**   **Catalog No.**

Department/College Signature*   **Department/College Name (Printed)***

_____   _____

Date*

_____

Submit this form to the appropriate college office for processing.

Only completed forms will be accepted/processed.

<u>Updated 3/2020</u>