

NORTH KINGSTOWN SCHOOL DEPARTMENT

**APPLICATION FOR PAYMENT OR ADVANCED DEGREE
INCREMENTS**

NAME _____ DATE SUBMITTED: _____

SCHOOL: _____ SUBJECT AREA OR LEVEL _____

I request approval of salary increment for advanced degree increments in accordance with the Provisions of Article XI, Section E of the Agreement between the School Committee and the North Kingstown Teachers' Association.

I have completed _____ graduate credits beyond a _____ degree.

Transcripts or grade reports for ALL courses for which advanced degree credit is claimed are (attached) or (are on file in the Personnel Office)

Cross out the phrase which does not apply.

Signature of Teacher

Note: Please refer to Article XI, Section E for eligibility criteria. All applications along with transcripts and grade reports should be submitted to the Personnel Office by October 1st or April 1st.