## NORTH KINGSTOWN SCHOOL DEPARTMENT

## ADVANCED DEGREE INCREMENTS WORKSHEET

NAME			
SCHOOL:			
SUBJECT AREA OR LI	EVEL		
FTE:			
	GRADUATE	CREDIT REVIEW	
		it will be allowed toward paym tual schedule. Please fill out th	
College/University	Course #	Course Title	Credits
		TOTAL	CREDITS
Signed:		Date:	