NDHSAA Coop Application

Please review coop guidelines prior to beginning the application process.

		pecific athletics. If d begin in school				CHIC,		, No feet in Fores
	· ·	pplication: Please	-			2) X	(9-12)	
		n this application:		, ,	-	•	. (0 (2)_	
 				nrollments f			lved	
1.	Velva		7-8	7-12 _	184	_9-12_	*****	
2.	Sawyer		7-8	7-12	43	9-12	<u> </u>	
5.		· 	7-8	7-12		9-12		
		on numbers for eather previous year						
Sch	nool #1: (7-8)	(7-12) 7	(9-12)_	DNS_				-
Sch	nool #2: (7-8)	(7-12) 4	(9-12)_	DNS				
Sch	nool #3: (7-8)	(7-12)	(9-12)_	DNS	-			
Sch	nool #4: (7-8)	(7-12)	(9-12)_	DNS	<u>_</u>			
Sch	nool #5: (7-8)	(7-12)	(9-12)_	DNS				
		participation num ed for fine arts or		each grade f	or eacl	h schoo	l involved	i: Boys and girls
Sch	nool #1: (7-8)	(7-12)7	(9-12)					
Sch	nool #2: (7-8)	(7-12) 3	(9-12)_					
Sch	nool #3: (7-8)	(7-12)	(9-12)					
Sch	nool #4: (7-8)	(7-12)	(9-12)_	· · · · · · · · · · · · · · · · · · ·				
Sch	nool #5: (7-8)	(7-12)	(9-12)					

In the space provided, please list th	ne reasons for requesting this o	coop application:
We feel the geographical location	n will provide better opportunit	y for student participation. Declining
enrollment will make it difficult for S	Sawyer to continue to sponsor	a program.
If approved, will this coop affect oth	ner schools: please circle: (Yes	(No) If yes, how?
Is this the nearest opportunity for so If No, Please indicate why closer so		
Has displacement of student been of the reason for this application to in this coop will allow Sawyer to con	improve competition levels or i	make participation available. Explain:
Other information that be useful for	the NDHSAA Board of Directo	ors in reaching a decision:
Required Signatures: School #1:	Superintend	dent. Date: 12-11-15
School #2: Wzenu (2	Superintend	dent. Date: Dec 8, 2015
School #3:	Superintend	dent. Date:
School #4	Superintend	dent, Date:
School #5	Superintend	dent. Date:
NDHSAA Board Action:	Signed:	Date: