NDHSAA Coop Application

Please review coop guidelines prior to beginning the application process.

application entering t	le form is to be used by all schools into on will be accepted and presented to the the required information. Each school used for gender specific athletics. Fin	the NDHSAA E I must provide	Board of Direct an official sig	ctors only upon all s gnature. Separate	schools	
If approved, this coop would begin in school year:2023-2024 No Fee-DNA Current Coop						
Grades involved with this application: Please check one. (7-8) (7-12) X (9-12) Mandan Center-Stanton						
Name of schools involved in this application: Host school must be listed first. Holy Family						
	Enrollments for grades involved					
1.	Mandan Public Schools	7-87	7-12	9-12 100		
2.	The Innovation School	7-87	7-12_6	9-12		
3.		7-8	7-12	9-12		
4.		7-8	7-12	9-12		
5.		7-8	7-12	9-12		
Activity covered by this application: Girls Gymnastics (ex: girls' basketball, speech etc.)						
List official coop name: Mandan Public Schools Mascot or nickname: Braves						
(Coop name and mascot must be the same as other coops if the same schools are involved.)						
Fill in the current participation numbers for each grade for each school involved: Indicate if you did not sponsor (DNS) this activity the previous year. Boys and girls enrollments are combined only for fine arts.						
S	chool #1: (7-8) (7-12) <u>2</u>	(9-12)	DNS			
S	chool #2: (7-8) (7-12)	(9-12)	DNS			
S	chool #3: (7-8) (7-12)	(9-12)	DNS			
S	chool #4: (7-8) (7-12)	(9-12)	DNS			
S	chool #5: (7-8) (7-12)	(9-12)	DNS			

Fill in next year's projected participation numbers for each grade for each school involved: Boys and girls enrollments may be combined for fine arts only.

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School #1: (7-8) (7-12)							
School #2: (7-8) (7-12)	<u>O</u> (9-12)						
School #3: (7-8) (7-12)	(9-12)						
School #4: (7-8) (7-12)	(9-12)						
School #5: (7-8) (7-12)	(9-12)						
In the space provided, please list the reasons for requesting this coop application:							
The Innovation School does not have gymnastics							
If approved, will this coop affect other schools: please circle: (Yes) (No) If yes, how?							
Is this the nearest opportunity for schools to coop? please circle: (No) If No, Please indicate why closer school(s) are not included in this application.							
Has displacement of student been considered by each school? (Yes) (No)							
Is the reason for this application to improve competition levels or make participation available. Explain: To make participation available							
Other information that be useful for the NDHSAA Board of Directors in reaching a decision:							
Required Signatures:							
School #1:	Superintendent. Date: 5-31-23						
School #2: MBauth	Superintendent. Date: 5-31-73						
School #3:	Superintendent. Date:						

NDHSAA Board Action:	Signed:	Date:
School #5	Superintendent.	Date:
School #4	Superintendent.	Date:

Approved: January 23, 2009---latest review: October 8, 2009