NDHSAA Coop Application

Please review coop guidelines prior to beginning the application process.

 School #1: (7-8)
 (7-12) 28
 (9-12)

 School #2: (7-8)
 (7-12) 0-2
 (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)

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		volved with this ap					micrizing Jackhild Challen
Nam	e of s	schools involved in	this application	n: Host so	chool must be list	ted first.	
				E	<u>Enrollments for g</u>	rades involved	
	1.	Williston High Sc	hool	7-8	7-12	9-12 1242	
	2.	Trenton School		7-8	<u>7-12 8</u>	9-12	
	4.			7-8	7-12	9-12	****
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In the space provided, please list th	e reasons for requesting this coop application:
To provide an opportunity for Trento	on students to participate in boys tennis if they desire.
New York Control of the Control of t	
If approved, will this coop affect oth	er schools: please circle: (Yes) ((No)) If yes, how?
	chools to coop? please circle: (Yes) (No) chool(s) are not included in this application.
	considered by each school? (Yes) (No)
• •	improve competition levels or make participation available. Explai
To make participation available to T	renton students. Trenton does not have a tennis program.
Other information that be useful for	the NDHSAA Board of Directors in reaching a decision:
Described Circulum (
Required Signatures / / / / School #1: / / / / / / / / / / / / / / / / / / /	Fandley Superintendent. Date: 5-23-23
School #2: Matt Sen	Superintendent, Date: 2-22-23
School #3:	Superintendent. Date:
School #4	Superintendent. Date:
School #5	Superintendent. Date:
NDHSAA Board Action:	Signed: Date: