

NDHSAA Coop Application

Please review coop guidelines prior to beginning the application process.

This single form is to be used by all schools involved in this cooperative sponsorship application. This application will be accepted and presented to the NDHSAA Board of Directors only upon all schools entering the required information. Each school must provide an official signature. Separate applications must be used for gender specific athletics. Fine arts are not gender specific.

LATE FEE
SUBMITTED AFTER EOS

If approved, this coop would begin in school year: 2026-2027

Grades involved with this application: Please check one. (7-8) (7-12) (9-12)

Name of schools involved in this application: Host school must be listed first.

Enrollments for grades involved

1. <u>Richardton-Taylor</u>	7-8	_____	7-12	135	9-12	_____
2. <u>Hebron</u>	7-8	_____	7-12	70	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: Boys Cross Country (ex: girls' basketball, speech etc.)

List official coop name: Richardton-Taylor-Hebron (RTH) Mascot or nickname: Raiders

(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.

School #1:	(7-8) _____	(7-12) <u>7</u>	(9-12) _____	DNS _____
School #2:	(7-8) _____	(7-12) <u>6</u>	(9-12) _____	DNS _____
School #3:	(7-8) _____	(7-12) _____	(9-12) _____	DNS _____
School #4:	(7-8) _____	(7-12) _____	(9-12) _____	DNS _____
School #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.

School #1:	(7-8) _____	(7-12) <u>7</u>	(9-12) _____
School #2:	(7-8) _____	(7-12) <u>2</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:

Hebron is requesting the coop because of low participation numbers between the current coop with Hebron and Glen Ullin. Over the last two years Hebron/Glen Ullin has not been able to field a varsity girls basketball team and their numbers are slowly going down. Also Richardton-Taylor has been struggling to find students to participate in various sports that makes it difficult to have competitive teams at times.

If approved, will this coop affect other schools: please circle: **(Yes)** (No) If yes, how? Hebron would dissolve the current coop between them and Glen Ullin.

Is this the nearest opportunity for schools to coop? please circle: **(Yes)** (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:
This coop would be to make participation available because of low participation numbers between the school in the majority of activities.

Other information that be useful for the NDHSAA Board of Directors in reaching a decision:

The coop discussion was opened up because Hebron/Glen Ullin has not had a varsity girls basketball team for the past 2 years. We want to give everyone the opportunity to play. Looking at projected numbers it seems that participation would be decreasing in other activities as well. The coop would also give students an opportunity to participate in some fine arts activities that have not been available in the past.

Required Signatures:

School #1: Russell Ziegler Superintendent. Date: 3-3-2024

School #2: Myra Scheff Superintendent. Date: 3-3-24

School #3: _____ Superintendent. Date: _____

School #4 _____ Superintendent. Date: _____

School #5 _____ Superintendent. Date: _____