



# Montana High School Association

1 South Dakota Avenue ♦ Helena, MT 59601 ♦ (406) 442-6010 ♦ Fax: (406) 442-8250 ♦ www.mhsa.org

**TO: MHSА MEMBER SCHOOLS**

**FROM: MARK BECKMAN, EXECUTIVE DIRECTOR**

**RE: COOPERATIVE AGREEMENT**

Enclosed you will find a copy of the MHSА Executive Board philosophy concerning cooperative programs and a set of application blanks.

The MHSА Board and Staff would like to outline some of the possible problem areas that should be considered before entering into a cooperative program.

- A. Participation by your students: if you already have a program, are students from another school going to replace students from your community and thus deny sons and daughters of your local taxpayers an opportunity to take part in that activity?
- B. Who will pay for the cost of equipment and the travel for the activity trips?
- C. How will the gate receipts be handled?
- D. Who is responsible for the cost of travel to and from practice sessions?
- E. Are your local eligibility rules the same for all students in all schools in the agreement?
- F. Can schedules for practice sessions and games be coordinated to eliminate class schedule conflicts in the different schools?
- G. How is selection of cheerleaders made?
- H. Are activity tickets honored from all cooperative schools at cooperative events?
- I. Are your training rules the same?
- J. Are academic standards the same?
- K. How will insurance coverage be financed etc.?
- L. How will physical exams be handled?
- M. How is coaching staff hired and how is staff paid?
- N. How will activity tickets and other passes be determined?
- O. Who selects and pays for officials?
- P. Do the affected schools have booster clubs? How will booster funds be applied to co-operatively sponsored programs?

***Important Item: Because of recurring problems, the MHSА Executive Board emphasizes that no portion of the three years of this activity's dues will be waived unless the schools request a dissolution from the Board. If no students participate in that activity in a particular year, a request for refund may be made by contacting the MHSА office in writing. Refund requests must be made no later than the first allowable date for competition in that sport/activity. Continued requests for refunds will be reviewed by the Executive Director.***

## **MONTANA HIGH SCHOOL ASSOCIATION**

### **Application for Cooperative Sponsorship**

Cooperative sponsorship of any activity by member schools will be considered under the following conditions:

1. Schools are to be located in the same geographical area.
  2. All member schools of the MHSA will be eligible to participate in the cooperative sponsorship program.
  3. Cooperative sponsorship agreements will be approved and enforced for a minimum of three years.
  4. The school boards of the participating member schools must jointly make the application to the MHSA Executive Director.
  5. A resolution from each school board stating the purpose for sponsoring a joint team or activity must be submitted to the MHSA office.
  6. Requests must be submitted to the MHSA Executive Director for the following year.
  7. A check in the amount of \$250.00 must be enclosed with this application.
  8. Any cooperative request that is denied can be appealed to the MHSA Executive Board.
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### **PHILOSOPHY**

- A. The philosophy that will guide the MHSA Executive Director in reviewing and approving applications for Cooperative Sponsorship of Activities is as follows:
  1. The Executive Director will attempt to increase the number of students that are participating in activities by making activities available for the students that would not be available in their school if joint sponsorship did not occur.
  2. The Executive Director would prefer to see projects that combine smaller schools for sponsorship of an activity rather than a small school combining with a larger school when the smaller school cannot support the activity alone.
  3. Improving the quality of a team (i.e. better win-loss record) will not be valid criteria in deciding whether approval should be granted.
- B. Agreements are for a three year period, but may be terminated by the Executive Director under the following conditions:
  1. Closing of one of the schools.
  2. A valid complaint from surrounding schools concerning recruiting.
  3. Complaints from parents, boards of education, students in cooperating schools etc.
  4. Other valid reasons as determined by the Executive Director.

**APPLICATION FOR COOPERATIVE SPONSORSHIP**

Each participating school must submit a copy to the Montana High School Association, 1 South Dakota Avenue, Helena, MT 59601.

Each school involved in the cooperative agreement must complete this application form before the Executive Director will consider the application. A check for \$250 must accompany each application if the applying school does not currently participate in the activity. A separate application must be submitted for each activity.

1. School: \_\_\_\_\_ Date of Application: \_\_\_\_\_
2. School's Address: \_\_\_\_\_
3. Classification: \_\_\_\_\_
4. Enrollment: \_\_\_\_\_
5. Other schools involved in this application: \_\_\_\_\_
6. Which school will considered to be the "host" school: \_\_\_\_\_
7. Activity covered by this application: \_\_\_\_\_
8. Please describe the conditions that have prompted your request to co-sponsor this activity:
  
9. This application is for school years: (must be for a full three year period)  
 20\_\_\_\_-20\_\_\_\_; 20\_\_\_\_ - 20\_\_\_\_; 20\_\_\_\_ - 20\_\_\_\_

Contracts do not need to be renewed until the end of the three years. However verification form will be sent to you each spring to assure the MHSА that the cooperative agreement is continuing under the contract. The Executive Director, as outlined under PHILOSOPHY Section B of the information accompanying this application, may terminate the cooperative agreement.

10. Please list the number of students in your school that have participated in this activity during each year indicated below. If the school did not sponsor the activity during any of the years listed, please respond "did not sponsor" but please provide your projected number of participants for next year and for two years from now.

<b>Grade Level</b>	<b>12</b>	<b>11</b>	<b>10</b>	<b>9</b>	<b>8</b>	<b>7</b>
Last school year:						
Current school year:						
Anticipated next year:						
Anticipated in two years						

11. Total **male** school enrollment:

<b>Grade Level</b>	<b>12</b>	<b>11</b>	<b>10</b>	<b>9</b>	<b>8</b>	<b>7</b>
Last school year:						
Current school year:						
Anticipated next year:						
Anticipated in two years						

12. Total **female** school enrollment:

<b>Grade Level</b>	<b>12</b>	<b>11</b>	<b>10</b>	<b>9</b>	<b>8</b>	<b>7</b>
Last school year:						
Current school year:						
Anticipated next year:						
Anticipated in two years						

13. Under cooperative sponsorship, what will be the identity of the team? \_\_\_\_\_

14. Where will practices/rehearsals be held? \_\_\_\_\_

15. Where will competition be held? \_\_\_\_\_

16. Indicate the date and place of the school board meeting where filing of this application was approved:

Date: \_\_\_\_\_ Place: \_\_\_\_\_

17. Please include in the space provided (or attach) an exact copy of the above motion as it appears or will appear in the official school board minutes:

18. Other information that may assist the Executive Director in making a decision on this application:

Approved: \_\_\_\_\_  
School Board Chairperson

\_\_\_\_\_  
Superintendent

***For MHSA Office Use Only:***

***Official Action of the Montana High School Association***

This request for Cooperative Sponsorship is approved / denied for the activity for the school years listed on the application.

By: \_\_\_\_\_ Date: \_\_\_\_\_  
MHSA Executive Director