Application for Cooperative Team Sponsorship

Deadlines for submission of applications:
Aug. 1=Fall sports/activities; Oct. 1=Winter sports/activities; Feb. 1=Spring sports/activities

For criteria under which cooperative teams may be formed, refer to Section 2.030 of the By-laws and Section 26 of the Administrative Procedures, Guidelines and Policies Section in the IHSA Handbook with Illustrations.

1. This application is for cooperative sponsorship of a team for the two-year classification cycle covering 2023-2024 and 2024-2025 school years.

(Specify Gender of Team – if applicable) (Sport/Activity) (Cooperative Team Conference)

2. This application must include the following:
   - letters from the presidents of ALL conferences of which each school in this cooperative are members for ANY sport/activity, certifying that this cooperative team has been approved by the conferences
   - a letter from the president of the conference of which this cooperative team will be a member during the co-op, certifying that this cooperative team has been approved for participation in the conference. If this cooperative team will not participate in a conference, attach letters approving the cooperative team from seven (7) schools on its upcoming schedule.
   - a signed copy of the intergovernmental agreement of this cooperative team, formally adopted by the boards of education of the participating schools for the school terms listed above, detailing your agreement in respect to insurance, coaching personnel and compensation, liability, facilities, equipment, etc. It must indicate that procedures are established for checking on student eligibility and complying with all IHSA By-Laws. Local policies which will be implemented in respect to training rules, academic standards, etc., must be agreed upon. (Copy of the intergovernmental agreement must accompany each request.)

3. NAME OF SCHOOLS CITY ALL CONFERENCE AFFILIATIONS OF EACH SCHOOL IN COOPERATIVE ENROLLMENT

__________________________________________ ______________________ ______________________ ______________________

__________________________________________ ______________________ ______________________ ______________________

__________________________________________ ______________________ ______________________ ______________________

__________________________________________ ______________________ ______________________ ______________________

__________________________________________ ______________________ ______________________ ______________________

4. The following rationale underlies our desire for cooperative team sponsorship:

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

________________________________________________________________________________________________________

5. The number of students participating in this sport/activity at each cooperating school, and the number expected to participate in this sport/activity under the cooperative agreement is:

   SCHOOL NO. OF STUDENTS WHO PARTICIPATED IN PREVIOUS YEAR NO. OF STUDENTS EXPECTED TO PARTICIPATION CO-OP

   __________________________________ __________________________________ ______________________________

   __________________________________ __________________________________ ______________________________

   __________________________________ __________________________________ ______________________________

   __________________________________ __________________________________ ______________________________

6. Host school: Contact person: 

Team school name: Team nickname: 

Practices to be held at: Home contests to be held at: 

7. The following signatures certify that formation of this cooperative team will not reduce participation opportunities for students in any of the cooperating schools and has been approved by formal vote of the boards of education and administrations of all schools in the cooperative.

SCHOOLS BOARD PRESIDENTS’ SIGNATURES PRINCIPALS’ SIGNATURES

__________________________________________ ______________________ ______________________ 

__________________________________________ ______________________ ______________________ 

__________________________________________ ______________________ ______________________ 

__________________________________________ ______________________ ______________________ 

Official IHSA Action

The above application for cooperative team sponsorship IS IS NOT granted for the 2023-2024 and 2024-2025 classification cycle.

(Date) Authorized IHSA Administrator