

## ADMINISTRATIVE REPORT

**DATE:** October 28, 2021  
**TOPIC:** #8.2 – WHS Girls Hockey Cooperative  
**PRESENTER:** Kristine Schaefer, Assistant Superintendent  
Jodi Loeblein-Lecker, WHS Activities Director  
**REFERENCE TO POLICY/STATUTE:** Policy 510.1

### A. PURPOSE OF REPORT

- a. There is currently a Co-op at WHS for girl's hockey
- b. We will be adding an additional school to the Co-op, per MSHSL the current Co-op will be dissolved and a new Co-op created.

### B. RECOMMENDATION

- a. Approval



### Application for Cooperative Sponsorship

**Deadline: Not later than 30 days prior to the first day of practice for that sport season.**  
PLEASE SEE BYLAW 403.2 (A-C) and 403.4 (A-D) (amended May 15, 2017) FOR INFORMATION REGARDING REQUIRED DOCUMENTATION  
AND APPLICATION PROCEDURE

The governing boards of each participating school must jointly make application for cooperative sponsorship.

On behalf of the following schools, we hereby apply for cooperative sponsorship of **Girls Hockey** \_\_\_\_\_  
beginning with the **2020** - **2021** school year. (activity) (boys' or girls') (Adapted-CI or PI)

List **ALL** schools included in the cooperative sponsorship. *Attach another form if necessary.*

	School	Enrollment (9-12)*	City	Administrative Region**	Competitive Section**
High School #1:	Woodbury	1951	Woodbury	4AA	4AA
High School #2:	St Croix Prep				
High School #3:	St Croix Lutheran				
High School #4:	New Life Academy				

\*Enrollment reported to the State of Minnesota on October 1 of the previous school year.

\*\*Current (Number and Class)

- Do any of the above schools belong to a conference in this activity?  
☒ **Yes** This application must include a review and comments from the conference(s) of which the schools are members.  
☐ **No**
- Do any of the above schools currently have a cooperative agreement in this activity?  
☒ **Yes** An application for dissolution must be submitted for the existing agreement.  
☐ **No**
- Describe the conditions which have prompted your request to co-sponsor this activity. (See model resolution at [www.mshsl.org/About MSHSL/Membership Information: A History & Model Resolution for School Boards](http://www.mshsl.org/About%20MSHSL/Membership%20Information%20A%20History%20&%20Model%20Resolution%20for%20School%20Boards))

- List the number of students, by grade level, who participated in this activity during the previous year. *If the school did not sponsor the program last year, indicate the number of students expected to participate in this cooperatively-sponsored activity this year if approved.*

	7th	8th	9th	10th	11th	12th
High School #1	0	1	8	9	8	6
High School #2						
High School #3						
High School #4						

- Team Identification: (Indicate how cooped schools should be identified in tournament programs): \_\_\_\_\_

Woodbury \_\_\_\_\_

- Team Colors: Blue + white Team Mascot: Royals

- Host School (school that will receive revenue share check): Woodbury

Board of Education (or designee)	School	Date
Signed _____	_____	_____
Signed _____	_____	_____
Signed _____	_____	_____
Signed _____	_____	_____

#### Official Action of the MSHSL Board of Directors

☐ Approved ☐ Not Approved

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

MSHSL Executive Director



### Application for Cooperative Sponsorship

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	School	Enrollment (9-12)*	City	Administrative Region**	Competitive Section**
High School #5:	Twin Cities Academy	282	St Paul	4A	4 AA
High School #6:	Great River School		St Paul	4A	4 AA
High School #7:	Nova		St Paul		

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	7th	8th	9th	10th	11th	12th
High School #5					1	
High School #6			1			
High School #7						

5. Team Identification: (Indicate how cooped schools should be identified in tournament programs): \_\_\_\_\_

6. Team Colors: \_\_\_\_\_ Team Mascot: \_\_\_\_\_

7. Host School (school that will receive revenue share check): \_\_\_\_\_

Board of Education (or designee)	School	Date
Signed _____	#5 TCA	10-19-21
Signed _____	#6 Great River	10-19-21
Signed _____	#7	
Signed _____		

#### Official Action of the MSHSL Board of Directors

☐ Approved

☐ Not Approved

Signature: \_\_\_\_\_

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

MSHSL Executive Director