

**MAINE PRINCIPALS' ASSOCIATION
APPLICATION FOR THE ESTABLISHMENT OF A COOPERATIVE TEAM**

This form is to be submitted when applying for the establishment of a cooperative team in any MPA-sponsored activity. A separate form must be completed for each team. The formation and/or continuation of a cooperative team is intended to provide additional opportunities for students. It is not designed to be used as a cost savings measure. Please note that all schools must submit eligibility rosters but the host school (typically, but not always, the school with the largest number of athletes participating) will be responsible for completing all other required paperwork. This application must be submitted at least three months prior to the start of the competitive season.

Sport Requested: _____ Gender: M F Date of Application: _____
This is a first request. This is a reapplication for an existing team.

1. Please provide a short rationale for the formation of the cooperative team. (Attach additional sheet, if necessary.)
2. Schools involved in Cooperative team. Please note that only three schools may be involved and that adding a fourth school would require a waiver. If a school did not sponsor the sport the previous year please estimate the number of athletes that will participate on the team during the coming year.

School #1 (Host School)

School Enrollment

Number of Athletes that Participated in Sport the Previous Season:

Administrative & School Board Approval: Yes No

Sponsored Sport in Previous Year: Yes No

School #2

School Enrollment

Number of Athletes that Participated in Sport the Previous Season:

Administrative & School Board Approval: Yes No

Sponsored Sport in Previous Year: Yes No

School #3

School Enrollment

Number of Athletes that Participated in Sport the Previous Season:

Administrative & School Board Approval: Yes No

Sponsored Sport in Previous Year: Yes No

School #4 (Waiver Required)

School Enrollment

Number of Athletes that Participated in Sport the Previous Season:

Administrative & School Board Approval: Yes No

Sponsored Sport in Previous Year: Yes No

3. Will there be a sub-varsity program available? Yes No
4. Will there be athletes displaced (cut) from program? Yes No
5. Name of cooperative team (Limited to 30 character and must include reference all schools involved): _____

(For MPA use only): MPA Modified Enrollment: MPA Classification:
MPA Sport Committee Approval: Yes No MPA Executive Director Approval: Yes No

Signature: _____ Date: _____