

Education Programs

Independent Provider Activity Programs

I. Purpose

This policy provides criteria and rationale for the school district to facilitate student activities through the use of an independent provider. An independent provider is an individual, group, or organization that provides an opportunity for district students to participate in an extracurricular program that would not normally be offered and sponsored by the district.

II. General Statement of Policy

The school district recognizes that situations occur when, although students demonstrate an interest in an activity, it is not possible for the district to sponsor the activity due to staffing, facilities, budget, or other limitations. On an annual basis, the activities director, working with the Student Activities Advisory Committee ("SAAC"), will review and approve or disapprove of requested independent provider activities.

III. Criteria

- A. The independent provider activity may not duplicate an existing school district activity and must follow all district policies.
- B. Activities under consideration by the Minnesota State High School League ("MSHSL") will be given preferred consideration.
- C. All participants in the independent provider program must be fully enrolled students in the district in grades 9-12. Students below grade 9 are not eligible to participate in the program.
- D. There must be a team component and public competition involved for an activity to qualify as a program under this policy. All members of the team must be full-time students in grades 9-12 in the district. The team will be allowed to use the high school official logo, nickname and school colors in its competitions.

IV. Procedures and Requirements

- A. An individual, group or organization interested in applying for independent provider status should obtain an application packet from the high school activities office and complete the application packet, including additional background information. Renewal applications and compliance information must be done annually. Failure to renew annually jeopardizes independent provider status and benefits.

- B. The application and relevant materials must be completed and submitted to the activities director for review by SAAC no later than two months prior to the start of the independent provider-sponsored activity or on a designated date as determined by the administration. SAAC will review the application, decide whether an independent provider status will be granted, and ensure that the school board is informed of new independent providers for information as an appendix to this policy (Appendix II). The activities director will notify the provider of the district's decision. Additional information and/or a request for appearance at a SAAC meeting may be necessary.
- C. It is the responsibility of the independent provider to collect all registration forms, fees and other program-related information, and submit all items at the same time to the activities office.
- D. All students will be responsible for knowing and following all school district rules and policies concerning student activities including, but not limited to: attendance, conduct, academic eligibility and all other district eligibility requirements (see *Student Rights and Responsibilities Handbook* and Policy 627; Athletics, Fine Arts, and Activities – Participation and Academic Eligibility). Students will be disciplined for infractions.
- E. The district will provide copies of its sexual, racial, religious, harassment and violence policies to the independent provider for distribution to all personnel who will be working with the students.
- F. The independent provider will provide to the district, a certificate of liability insurance to provide for the safety of the student participants, naming the district as an additional insured party.
- G. As necessary, the independent provider will provide proof of adequate workers' compensation coverage to the district.
- H. The independent provider will provide the district with completed background checks on all coaches, advisors, employees or volunteers with the independent provider. Such background checks will be of a type acceptable to the district. The independent provider will cover the costs and any related incidental expenses to the background checks.
- I. All costs for the independent provider will be provided by the independent provider and/or participants. With availability and following district facility use policies, the independent provider may use district facilities for practices and/or games/contests.
- J. In order for participants in an independent provider activity to qualify for an Edina letter "E," the independent provider must have written lettering criteria meeting the requirements of this policy, approved by SAAC, and in place prior to the start of the season. The minimum requirements for lettering are:

1. The individual members of the team must have a time commitment of at least 150 hours, similar to other district activities in which a letter may be earned.
 2. The participation must be at an advanced rather than an entry level.
 3. The independent provider sport/activity must have a competition component, some part of which must be held in Minnesota, must be against other high school programs or clubs, and must be organized in such a way that the general public is aware of and may attend if they choose. The competitions must use a set of standardized rules or guidelines for play, teams must be able to compete against other teams of similar age, and there must be officials or judges who apply a standard set of judging criteria.
- K. At the conclusion of the season, the independent provider will provide the activities office with its awards list within seven days so certificates and letters can be prepared. Fees for providing certificates of participation and chenille letters ("E") are the responsibility of the independent provider.
- L. Upon approval, the district will work cooperatively with the independent provider and involved coaches, advisors and participants on meeting the needs of the activity program. This includes appropriate participation in meetings and communications.
- M. Approval as an independent provider will be effective for one calendar year or one season at SAAC's discretion.

Cross References:

Policy 627 (Athletics, Fine Arts, and Activities – Participation and Academic Eligibility)

Policy 628 (Student Activities Program)

Edina Public Schools Student Rights and Responsibilities Handbook

Policy
adopted: 10/26/09
amended: 07/23/12
Revised: 8/17/15

INDEPENDENT SCHOOL DISTRICT 273
Edina, Minnesota

Appendix I

Student Registration Form – Independent Provider Activity Programs

Edina High School Activities Department
6754 Valley View Road ▪ Edina, MN 55439 ▪ 952-848-3815 ▪ Fax 952-848-3818

This form must be completed and returned to the Activities Department before the student will be permitted to participate in independent provider activity programs.

Program/Activity/Sport: _____

Independent Provider: _____

Student Name: _____ Grade: _____
 First MI Last School (*circle one*): HS SV VV

Date of Birth: _____ Male _____ Female _____ Student ID#: _____

Father's Name: _____ Work Phone: _____

Mother's Name: _____ Work Phone: _____

Address (Street, City, Zip): _____

Home Phone: _____ Student lives with (*circle one*): Mother Father Both

Person, beside parent, to notify in case of emergency: _____ Phone: _____

I understand that this activity is provided by an independent provider and is not an activity of Edina Public Schools. My student will follow the policies and procedures of Edina Public Schools when participating in the program. All monies paid to the district are for administrative processing of end-of-the year awards for the program.

Parent/Guardian Signature _____ Date: _____

I will follow the policies and procedures of Edina Public Schools when participating in the program.

Student Signature _____ Date: _____

Independent Provider Insurance Waiver

I fully understand that Edina Public Schools **DOES NOT** provide insurance coverage for my student while participating in independent provider activity programs and that it is my responsibility to provide insurance coverage for my student.

Insurance Company: _____

Parent/Guardian Signature _____ Date: _____

Release of Student's Name and Pictures

Public directory information includes a student's name and pictures for a student participating in independent provider activity programs or events.

Parent/Guardian Signature _____ Date: _____

DISTRICT USE ONLY		
Date:	Independent Provider Activity Program:	Fee Paid:
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

Appendix II

INDEPENDENT PROVIDERS

Snowboarding
Equestrian
Rugby
Trapshooting
Ultimate Frisbee
Juggling
Bowling