

**APPENDIX E**

**HOME SCHOOL STUDENT  
CO-CURRICULAR REQUEST  
SCHOOL-BASED ACTIVITIES/EVENTS**

**Return To:  
Upper Adams School District  
Attention: Mrs. Candy Bretzman  
District Office  
161 North Main Street  
Biglerville, PA 17307  
(Due March 15th)**

Date \_\_\_\_\_

Student's Name \_\_\_\_\_

Grade \_\_\_\_\_

Supervisor \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ E-Mail \_\_\_\_\_

List school-based activities/events in which the student may participate.

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