

BLINN COLLEGE STUDENT REINSTATEMENT FORM

To be used following an administrative drop for nonattendance*

I, _____ request reinstatement in
Student Name (printed) Student ID

Course and Section CRN

Upon approval of my reinstatement request, I agree to attend and participate in the above named course and to comply with any other condition(s) agreed upon in the appeal process. I am aware that my attendance will be monitored. Additionally, I understand that if I am reinstated and have one more unexcused absence, I will once again be withdrawn and permanently denied reinstatement in this course.

Reasons for absences:

[Please attach additional documentation if needed.]

If the student and the faculty member agree on reinstatement conditions, please sign and submit this request to the Division Operations Coordinator.

Student Signature / Date

Faculty Signature / Date

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APPEAL

If the student and faculty member do not agree on reinstatement conditions, the student has the right to initiate a meeting with the Instructional Dean or Designee to request reinstatement into the dropped class.

*Note: this entire process must be complete within five school days.

OUTCOME: The student met with the Instructional Dean or Designee, and the decision was:

- Not to reinstate student to class for the reasons listed below.
- To reinstate student to class under the agreement stated above and signed below.

Comments:

Dean or Designee Signature / Date

Student Signature / Date

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Attention Faculty or Division Operations Coordinator: please scan and email the completed form to leigh.seilheimer@blinn.edu or fax to Admissions at 979-830-4110 or send via campus mail to Leigh Seilheimer, Brenham Campus. (Rev. 8/1/2017)