

# 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 Additionally, I understand that if I am reinstated and have one more unexcused absence, I will once again be withdrawn and permanently denied reinstatement in this course.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 [admissions@blinn.edu](mailto:admissions@blinn.edu) or fax to Admissions at 979-830-4110. (Rev. 11/15/2018)