



DROP REINSTATEMENT REQUEST FORM

THIS FORM IS UTILIZED BY STUDENTS REQUESTING REINSTATEMENT INTO CLASS AFTER BEING DROPPED FOR EXCESSIVE ABSENCES.

This form must be filled out by the student, and it is the student's responsibility to get approval and signature from their instructor. Once form is received by the CEF office with instructor approval, this form will be forwarded to the governing council for review. The governing council will make the final decision regarding reinstatement. If approved by the council, student will be reinstated into the course.

This form must be returned to Construction Education Foundation, Inc. at 101 S Bldg B Royal Lane, Coppell, TX 75019.

This portion to be completed by student:

(Please print)

Student Name: _____ Student Phone Number: _____

Course & Level: _____ Instructor Name: _____

Note: A separate sheet of paper may be used if more space is needed for the following sections:

Reason for excessive absences:

Special arrangements made with Instructor:

Any other comments:

Student Signature: _____ **Date:** _____

This portion to be completed by instructor:

(Please print)

Comments:

Instructor Signature: _____ **Date:** _____

This portion to be completed by governing council:

(Please print)

Reinstatement/arrangements approved: Yes No

Comments:

Council Chair Signature: _____ **Date:** _____

OFFICE USE ONLY Date Entered: _____ Entered By: _____
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