

**College of Southern Nevada**  
**Reinstatement Request Form for Non-Participation in Week 1**

---

**Student Name:** \_\_\_\_\_

**NSHE ID#:** \_\_\_\_\_ **Term:** \_\_\_\_\_

---

**Course Information**

- **Course Name:** \_\_\_\_\_
- **Course Section:** \_\_\_\_\_
- **Course ID (5-digit number):** \_\_\_\_\_

---

**Student Commitment Statement**

I, \_\_\_\_\_ (Student Name), acknowledge my failure to participate in the first week of class but am seeking reinstatement in the course. I commit to meeting all course requirements moving forward and understand that any further lack of participation may result in academic and financial consequences, including but not limited to receiving a failing grade and/or the recalculation of financial aid awards.

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

---

**Instructor Review and Approval**

**Instructor's Name (Printed):** \_\_\_\_\_

**Instructor's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

---

**Chair Review and Approval**

**Chair Name (Printed):** \_\_\_\_\_

**Chair Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

---

**Submission Instructions:**

The Chair's office must submit the completed form to the **Office of the Registrar – Participation** ([participation@csn.edu](mailto:participation@csn.edu)) no later than **END OF 3<sup>rd</sup> WEEK OF INSTRUCTION FOR THE COURSE**.