Request to  **ACCEPT English and/or Math Assessment Scores** From Another College

FOR: Student Name: ________________________________________________________________

Solano Community College Student ID Number: ________________________________

Birth Date: _______________Ph: (_______)____________________

E-Mail: ________________________________________________________________

All requests must include a copy of your drivers license, state issued ID, federal ID or passport and a clear photocopy of your official Assessment Scores from your other college.

College Name: ________________________________________________________________

Other College Student ID Number: _______________________________________________

Address: ________________________________________________________________

City: ___________________________State: _________Zip: __________________________

Ph: (_______)____________________Fax: (_______)________________________

☐ English Reading Score: __________________

Other College Reading Course Level: __________________

☐ English Writing Score: __________________

Other College Writing Course Level: __________________

☐ Math Score: __________________

Other College Math Course Level: __________________

Student Signature: ___________________________Date: ___________________________