



# Request of Verification of Entitlement

## Veterans Resource Center

Building 2700, Room 2750

4000 Suisun Valley Road

Fairfield, CA 94534

Office: (707) 864-7105 - Fax: (707) 646-2092

E-mail: [veterans@solano.edu](mailto:veterans@solano.edu) Website: <https://solano.edu/centers/veterans-resource-center/>

Student Name	Last 4 SSN	Student ID
Phone	Email	
Term: <input type="checkbox"/> Spring 20____ <input type="checkbox"/> Summer 20____ <input type="checkbox"/> Fall 20____		
Benefit: <input type="checkbox"/> CH30 <input type="checkbox"/> CH31 <input type="checkbox"/> CH33 Veteran <input type="checkbox"/> CH33 Dependent <input type="checkbox"/> CH35 <input type="checkbox"/> CH1606 <input type="checkbox"/> Fry Scholarship		

### Company Information

Name of Company			
Company's Phone #	Point of Contact E-mail		
Point of Contact Phone #	Fax #		
Company's Address	Company's City	Company's State	Company's Zip
Delivery Choice: <input type="checkbox"/> Deliver letter yourself <input type="checkbox"/> VRC to Email on your behalf <input type="checkbox"/> Fax			

Indicate Information Needed (Be Specific):

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SIGNATURE\_\_\_\_\_

DATE\_\_\_\_\_