



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 Website: <https://welcome.solano.edu/vrc-homepage/>

Student Name	SSN	Student ID
Phone	Email	
Term: ☐ Spring 20____ ☐ Summer 20____ ☐ Fall 20____		
Benefit: ☐ CH30 ☐ CH31 ☐ CH33 Veteran ☐ CH33 Dependent ☐ CH35 ☐ CH1606 ☐ 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: ☐ Deliver letter yourself ☐ VRC to Email on your behalf ☐ Fax			

Indicate Information Needed (Be Specific):

SIGNATURE_____

DATE_____