



TO: Solano Community College Assessment Center, Bldg. 400, Rm. 442  
4000 Suisun Valley Road, Fairfield CA 94534  
Ph: (707) 864-7118 Fax: (707) 646-2053

**Request to SEND SCC English and/or Math Assessment Scores to Another College**

FOR: Student Name: \_\_\_\_\_  
Solano Community College Student ID Number: \_\_\_\_\_  
Birth Date: \_\_\_\_\_ Ph: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**All requests must include a copy of your driver's license, state issued ID, federal ID or passport.**

Please Mail My Assessment Test Scores To:

Other College Name: \_\_\_\_\_  
Other College Student ID Number: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Ph: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Please E-Mail My Assessment Test Scores Attention To: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_

Please Fax My Assessment Test Scores Attention To: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Office Use Only**

Date Received:

Date Processed:

Source: Assessment Center—Updated 05-31-2014 by NM