



# **The Guttenberg Scholarship**

## **For Students with Physical Disabilities**

New Jersey Institute of Technology, New Jersey's Science & Technology University, has a long history of providing access to education for all students, regardless of economic, social, or physical disabilities. In keeping with this tradition, the Guttenberg Scholarship Fund continues to provide financial assistance for qualified students with physical disabilities.

The annual award, approximately \$2,500, may be applied towards the cost of tuition, fees, room and board, and/or a range of coordinated services available at NJIT to meet the special needs of students with disabilities. The scholarship is renewed each year, provided the student remains in good academic standing.

### **How to Apply**

Interested candidates must apply to NJIT through the regular admissions process. The application is available online at <http://www.njit.edu/admissions/apply-online.php>. In addition, students must complete the Guttenberg Scholarship Application Form, provide a letter from the doctor stating the nature of the disability, and include a teacher or counselor recommendation. Students should also submit the FAFSA for financial aid consideration.

For more information and application materials, contact the Office of University Admissions at 1-973-596-3300 or send [admissions@njit.edu](mailto:admissions@njit.edu).



New Jersey's Science & Technology University

## Guttenberg Scholarship Application Form

Please complete this application form and submit to the Office of University Admissions at NJIT. **This form is for the Guttenberg Scholarship only.** The undergraduate application for admission must also be submitted. Documentation from a doctor regarding the disability, and a letter of recommendation from a teacher or counselor must be submitted in support of the application for the scholarship.

The application form and all supporting documents should be sent to the following address:

Director of University Admissions  
Attn: Guttenberg Scholarship Committee  
323 Dr. ML King Jr Blvd  
Newark, NJ 07102

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Disability \_\_\_\_\_

Is Disability permanent or temporary? \_\_\_\_\_

Are you eligible for benefits through the Division of Vocational Rehabilitation?

\_\_\_\_\_

Will you need special consideration as to location of classes, hearing or visual aids, or parking facilities? If yes, please explain.

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