



New Jersey City University
Office of Specialized Services and Supplemental Instruction - K105
REGISTRATION FORM

Please return form to: Jennifer Aitken (jaitken@njcu.edu) or Jazmin Zegarra (jzegarra@njcu.edu)
Phone: 201-200-2091 or 201-200-2557 – Fax: 201-200-3083 http://web.njcu.edu/programs/oss

Please also complete an accommodation request form if you wish to request accommodations for the current semester.

Please attach appropriate and recent documentation of your disability. Students with learning disabilities are required to submit the most recent Individualized Education Plan (IEP), Educational Evaluation and Psychological Evaluation. All disability documentation should include the following: the credentials of the evaluator(s), diagnostic statement identifying the disability, description of the diagnostic methodology used, description of the current functional limitations, description of the expected progression or stability of the disability, current and/or past accommodations, services and/or medications, and recommendations for accommodations, adaptive devices, assistive services, compensatory strategies, and/or collateral support services.

Name: _____ Gothic ID#: _____

SSN#: _____ DOB: _____

Address: _____ Email Address: _____

City: _____ County: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____

NJCU Advisor: _____ Major: _____

OSP Counselor (if applicable): _____ TLC Counselor (if applicable): _____

If you are a client of DVR or the Commission for the Blind or the LEARN Program, please provide your counselor's name and contact information:

What is the nature of your disability? (Check all that apply):

- Learning Disability, Hearing Impairment, Asperger Syndrome/Autism, ADD/ADHD, Mobility Impairment, Visual Impairment, Psychological/Psychiatric Disability, Chronic Illness/Medical Diagnosis (please specify)

If you require Accommodations for the Placement Exam, please list them below.

Will you be residing on Campus? If yes, please list any required campus housing accommodations below.

Signature: _____ Today's Date: _____