

**Essex County Bar Association  
Announces  
The Biunno Scholarship for Law Students with Disabilities**

**Criteria:**

1. Recipient must demonstrate a present and permanent physical or mental disability that substantially limits one or more of the major life activities of the individual. Medical documentation establishing the nature and extent of the disability will be required.

Recipient must be a resident of New Jersey. There will be a preference given to Essex County residents.

Recipient must be attending law school or be accepted to and commencing studies in law school.

Recipient must have attained a 3.0 or equivalent GPA in law school, or if they are an incoming student, a 3.0 undergraduate GPA.

A preference will be given to a person seeking to pursue a career in the field of advocacy for persons with disabilities. Intent may be demonstrated by completing a course in disability law, work in a disability or disability-related clinic or prior job experience in an advocacy field or with a public interest organization.

A preference will be given to students who can demonstrate financial need.

**Restrictions:**

No scholarship awards will be given directly to students. The funds must be directed to a third party such as the law school for tuition or to a company providing equipment for the disabled student.

**Requirements:**

Completed applications must be submitted with all requested documentation no later than **May 5, 2017**.

Award decisions will be made by the Biunno family working in conjunction with the ECBA's Committee on the Rights of Persons with Disabilities.

PLEASE **DO NOT STAPLE** ANY DOCUMENTS TO APPLICATION. All documents should be attached with a paper clip.

**Essex County Bar Association**  
Committee on the Rights of Persons with Disabilities  
Historic Courthouse Rm B-01  
470 Dr. Martin Luther King, Jr. Blvd.  
Newark, New Jersey 07102

**IMPORTANT**

**PLEASE ATTACH THE FOLLOWING DOCUMENTATION**

1. Most recent law school transcript. (If you are a first year student, please provide first semester grades.)
2. Standing in your law school class.
3. Completed Graduate and Professional School Financial and Service form. This may be obtained from your school financial aid office.
4. Law school aptitude test score and final college cumulative average.
5. Resume
6. Invoices or any other documentation you can provide that describes what you will use the scholarship funds for, if it is other than tuition.
7. Medical documentation establishing the nature and extent of your disability. This may be in the form of a letter, medical records, or other similar evidence.

**NO AWARD WILL BE MADE WITHOUT THE SCHOLASTIC INFORMATION OR RECORDS, AS REQUESTED. IT IS THE RESPONSIBILITY OF EACH APPLICANT TO ENSURE THAT APPLICATIONS AND NECESSARY DOCUMENTS ARE RECEIVED BY THE ESSEX COUNTY BAR ASSOCIATION. IF THE APPLICANT DESIRES AN ACKNOWLEDGMENT, PLEASE REQUEST IT IN THE COVER LETTER TRANSMITTING YOUR APPLICATION.**

**Essex County Bar Association**  
Committee on the Rights of Persons with Disabilities  
Historic Courthouse Rm B-01  
470 Dr. Martin Luther King, Jr. Blvd.  
Newark, New Jersey 07102  
(973) 622-6207  
[www.essexbar.com](http://www.essexbar.com)

**APPLICATION FOR THE BIUNNO SCHOLARSHIP**  
2017-2018

Application and documentation must be received by

**May 5, 2017**

(Feel free to attach additional sheets if necessary to respond completely and accurately)

Name of applicant: \_\_\_\_\_

Current mailing address: \_\_\_\_\_

Permanent home address: \_\_\_\_\_

Length of time at home address \_\_\_\_\_ If less than 3 yrs, please list your previous  
address: \_\_\_\_\_

Email address \_\_\_\_\_ Phone \_\_\_\_\_

Date of birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Place of birth: \_\_\_\_\_

Citizenship: \_\_\_\_\_ # of years \_\_\_\_\_

Spouse's occupation: \_\_\_\_\_ Number of years in occupation \_\_\_\_\_

Law school you are currently attending \_\_\_\_\_

Address of Law School \_\_\_\_\_

Student Identification Number \_\_\_\_\_

Anticipated graduation date: \_\_\_\_\_

**Application for the Biunno Scholarship 2017-2018**

Applicant's name: \_\_\_\_\_

Please describe the nature and extent of your ties to New Jersey and/or Essex County:

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List all colleges and graduate schools attended, dates of attendance and degrees awarded:

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List any financial aid for 2016-2017 that you have applied for or received and if pending, when you expect to be advised:

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List all actual and anticipated employment from 2014 through 2018: Include employer's name and address, a brief description of duties and responsibilities, and salary:

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List college, law school and community activities and please include any positions you have held:

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List any honors or awards received and list any honor societies to which you have belonged since high school graduation:

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Please describe the nature and extent of your disability including the date of onset:

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Please describe the purpose(s) to which you would put the scholarship funds, if awarded to you, bearing in mind that the funds must be paid to a third party. (Examples: to XYZ Medical Device Co. for a particular device or piece of equipment to assist you; the XYZ Law School directly for tuition:

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List any additional information you would like us to consider:

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State why you believe that you should be awarded the Biunno Scholarship:

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In consideration of the facts set forth in this application, I respectfully petition that a scholarship be awarded to me for the academic year 2017-2018. I solemnly affirm that the information given in this application is true and correct.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_