



**MARSHFIELD HIGH SCHOOL  
SCHOLARSHIP APPLICATION – 2026**

1. Name of applicant \_\_\_\_\_
2. Home address \_\_\_\_\_
3. Phone number \_\_\_\_\_
4. Email address \_\_\_\_\_
5. Name of school you will attend \_\_\_\_\_
6. Have you received official notice of acceptance? \_\_\_\_\_
7. What course or program will you study? \_\_\_\_\_

**FAMILY INFORMATION:**

Parent information: (Circle correct parental status)

1. Name \_\_\_\_\_ Father Stepfather Legal Guardian  
Occupation \_\_\_\_\_  
Employer \_\_\_\_\_
2. Name \_\_\_\_\_ Mother Stepmother Legal Guardian  
Occupation \_\_\_\_\_  
Employer \_\_\_\_\_
3. Number of brothers and sisters \_\_\_\_\_ Younger \_\_\_\_\_
4. Number of siblings currently attending college \_\_\_\_\_



## COMMUNITY INVOLVEMENT

What community, volunteer, church or other out-of-school activities have you participated in? (example: food pantry, church youth group, 4-H, etc.)

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## EMPLOYMENT

What employment experience have you had during your high school years?

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## FINANCIAL INFORMATION

1. Do you plan to work during the college school year? \_\_\_\_\_
2. Will you submit a Free Application for Federal Student Aid (FAFSA)? \_\_\_\_\_  
If no, why? \_\_\_\_\_
3. Explain how you plan to finance your education? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## ESSAY

**Briefly state your career goals and what influenced your decision. Why is receiving a scholarship important to you? Also, please describe where you see yourself after college (working in public or private accounting, what size firm you would like to work at, where you would like to live, etc.).** Please complete on another sheet of paper and attach to Scholarship Entry Form.

**CERTIFICATION, ALL APPLICANTS:**

I certify that all information I have provided on this form is true and complete to the best of my knowledge. I agree to give proof of the information on this application if requested. I give permission to the selection committee to review information on this form, my transcripts, test scores and additional supporting documentation submitted as part of this application.

**Applicants signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Parent/Guardian:** \_\_\_\_\_

This completed application is due to Haley Fox by  
**FRIDAY, APRIL 3, 2026.** Please email the scanned application to  
[hfox@workforcehrsolutions.com](mailto:hfox@workforcehrsolutions.com) with **MBE CPA Scholarship Submission**  
– **Marshfield** as the subject line.