

**CFA SOCIETY MADISON SCHOLARSHIP**  
**2026 CFA Exams**

*Applications must be received May 1, 2026*

Scholarships for \$800 towards the 2026 CFA exams are available through the CFA Society Madison to help candidates defer the cost of pursuing the CFA designation. Applicants must fulfill all CFA candidate requirements to be eligible for a scholarship. Scholarships are not available to CFA Society Madison officers, directors, employees or their immediate families.

- **Candidates are ineligible if their current employer provides any financial assistance for participation in the CFA Program.**
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- **Scholarships can be awarded even if a candidate has already registered for the 2026 exams.**
  - **Candidates must sit for the exam in 2026 and provide proof in order to receive a scholarship payment.**
  - **Candidates must sit for the exam in Madison and be from the Madison area, or be a student at a nearby college or university with the expectation of post-graduation employment in the same area.**
  - **Any Candidate who receives CFA Institute's Access Scholarship for 2026 is not eligible for the CFA Society Madison Scholarship in 2026.**
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**Complete the following:**

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: State: Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

E-mail: \_\_\_\_\_

Are you a member of a CFA Institute Society? ☐ Yes ☐ No If yes, give name: \_\_\_\_\_

Are you employed?

☐ Part-time ☐ Full-time Name of employer: \_\_\_\_\_

Address of employer: \_\_\_\_\_

Occupation: \_\_\_\_\_

May we contact your supervisor? ☐ Yes ☐ No

If yes, name of supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

Are you a student? ☐ Part-time ☐ Full-time Level of school completed: \_\_\_\_\_

Name of undergraduate college or university: \_\_\_\_\_

Name of graduate college or university: \_\_\_\_\_

Highest degree held: \_\_\_\_\_

If no degree is held, when do you expect to receive your degree? \_\_\_\_\_

Current field of study: \_\_\_\_\_

Name of Professor: \_\_\_\_\_ Phone: \_\_\_\_\_

Which exam level will you be sitting for? ☐ Level I | ☐ Level II | ☐ Level III

What month will you be taking the exam? \_\_\_\_\_

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**Please complete the questions on page 2 of this application.**

Why do you want to achieve the CFA® Charter?

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Briefly describe your involvement in activities and organizations:

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Briefly describe your financial need for this scholarship:

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Briefly describe your professional goals and what role CFA Society Madison may play in you accomplishing those goals:

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Please attach the following:    ☐ Resume or biography  
   ☐ Letter of Recommendation

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

Submit application and relevant attachments to [cfa@cfamadison.org](mailto:cfa@cfamadison.org)