

### 2026 GO WISCONSIN EMMA D. BOETTIGER SCHOLARSHIP

### **PURPOSE**

The 2026 Go Wisconsin Emma D. Boettiger Scholarship was established to encourage the pursuit of a post-secondary degree at the Universities of Wisconsin. The scholarship will award two academic scholarships to Wisconsin high school students who plan to enroll at a Universities of Wisconsin institution beginning Fall 2026 term. The scholarships are given in memory of Emma Boettiger's sister, Nettie Dieckmann, and nephew, Freddie Dieckmann.

### **AWARD**

The scholarship provides a total of \$8,000, distributed as \$2,000 per year over four consecutive years. Each year, recipients will receive \$1,000 for the fall semester and \$1,000 for the spring semester. Award recipients will need to provide proof of enrollment before funds are disbursed for both the fall and spring terms each year.

## **APPLICATION AND SELECTION PROCESS**

Go Wisconsin utilizes a holistic review process to determine the 2026 Go Wisconsin Emma D. Boettiger Scholarship recipients. Students interested in applying for the scholarship should fill out the application form. The Go Wisconsin Scholarship Committee will monitor the selection process.

APPLICATION DEADLINE: Monday, March 2, 2026, by 4:30 PM CST

#### **ELIGIBILITY AND SELECTION GUIDELINES**

The following qualities will be taken into consideration in the selection process:

- Applicant must currently be a Wisconsin high school senior (12th grade) student
- Applicant must have a minimum cumulative Grade Point Average (unweighted) of 2.0 out of 4.0
- Applicant must complete the Free Application for Federal Student Aid (FAFSA) form
- Applicant demonstrates financial need
- Applicant plans to attend a Universities of Wisconsin institution as a full-time, new freshman/first-year student beginning Fall 2026
- Preference will be given to applicants planning to major in a health-related field

## **SUBMISSION**

Submit the application along with all required application materials and submit electronically using <u>THIS LINK</u> by Monday, March 2, 2026 at 4:30 PM CST.

• Link URL: https://uwsystemadmin.qualtrics.com/jfe/form/SV 0pProHCLhTxxE46

### **NOTIFICATION AND PAYMENT**

The Go Wisconsin team will notify the recipient via a congratulatory email and letter by April 2026. The recipient must provide proof of enrollment to Go Wisconsin for the scholarship to be processed.

Questions or requests for further information can be directed to Go Wisconsin.

Go Wisconsin
Van Hise Hall, 1220 Linden Drive, Madison, WI 53706
(800) 442-6459 | contact@wisconsin.edu | go.wisconsin.edu



# 2026 GO WISCONSIN EMMA D. BOETTIGER SCHOLARSHIP APPLICATION FORM

## **APPLICATION DEADLINE:**

Completed applications to be submitted to the Go Wisconsin office by Monday, March 2, 2026 at 4:30 PM CST.

## **REQUIRED APPLICATION MATERIALS**

- 1. Completed Application Form
- 2. Resume and/or list of extracurricular activities: Please provide a resume and/or list of high school and community activities, identifying up to 10 extracurricular, service activities, or work experiences that best represent you. Please include the organization name, dates of involvement, positions held, and a brief description of activity. This document should be in a resume format, and information can be presented as bullet points.
- 3. **Typed essay**: This application requires applicants to submit a short essay (approximately 250 words) addressing the following:
  - a. What are your education and career goals?
  - b. What previous experiences have been particularly significant in your personal development?
- 4. Unofficial high school transcript

## **APPLICANT INFORMATION**

NIANAE

First:	Middle:	Last:
	tment/unit number if applicable):	
		Zip Code:
EMAIL ADDRESS:		
AREA CODE & PHONE NUI	MBER:	
HIGH SCHOOL:		
UW CAMPUS YOU PLAN T	O ATTEND: University of Wiscons	in
INTENDED MAJOR:		
FINANCIAL INFORMATION		
Date of FAFSA Completion:		
Please include any special n committee to consider.	eeds, hardships, financial obligatio	ons, or extenuating circumstances that you would like the



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## **ACADEMIC RECORDS RELEASE AUTHORIZATION FORM**

## **APPLICANT**

I authorize my high school to release this application and the required supporting documentation (unofficial high school transcript is acceptable) to the Go Wisconsin Scholarship Committee.

STUDENT NAME:	
STUDENT SIGNATURE:	
DATE:	
ADMINISTRATIVE PERSONNEL/SCHOOL COUNSELOR	
CUMULATIVE GRADE POINT AVERAGE:	
CLASS RANK:	
ADMINISTRATIVE PERSONNEL/SCHOOL COUNSELOR NAME:	
ADMINISTRATIVE PERSONNEL/SCHOOL COUNSELOR SIGNATURE:	
DATE:	



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## **CONFIRMATION SIGNATURE**

- I hereby affirm that I intend to enter a Universities of Wisconsin institution as a full-time student with the purpose of pursuing a degree.
- I hereby affirm that all the information submitted as part of my application is true and complete to the best of my knowledge and understand that any false or missing information may disqualify me from consideration or receipt of the scholarship. I also affirm that the essay submitted as part of this application is my own work.

Signature of Applicant:	Dat	e:
•	<del> </del>	

## **SUBMISSION**

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