

**The Israel Brooks Memorial Scholarship **2026-2027** Application**  
**College Freshman (High School Graduate) College Undergraduate**

**Complete all *information requested below.***  
*Applications must be received by COB. **July 5, 2026***

***Applicant Information:***

<i>First</i>	<i>Middle</i>	<i>Last</i>	<i>Gender</i>
<i>Street Address</i>			
<i>City</i>	<i>State</i>	<i>Zip</i>	
<i>Home Phone</i>	<i>Cell Phone</i>	<i>Email Address</i>	
<i>Name of Parent(s)/Guardian</i>			
<i>Parent(s)/Guardian's Address (If different from applicant)</i>			
<i>Street Address</i>			
<i>City</i>	<i>State</i>	<i>Zip</i>	
<i>Current College/High School</i>	<i>Year</i>	<i>GPA</i>	
<i>City</i>	<i>State</i>	<i>Zip</i>	

## ***Activities***

### *Leadership Activities*

--

### *Community Service Activities*

---

--

*Hobbies/Interests*

*College and University*

## Freshman/Undergraduate Application Form

***Please check the circle and sign below:***

- I represent all information I have provided in this application is correct and true to the best of my knowledge.
- I understand that if I fail to meet the above criteria for the award, the award will be rescinded and given to an eligible student.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### ***MISSION STATEMENT:***

*The Israel Brooks Jr. Memorial Scholarship was established to encourage college students to pursue their educational dreams and achieve educational excellence. By making this scholarship available, the Brooks Family wishes to continue his commitment to service, community, young people, and education.*