

DEE DOWELL MEMORIAL SCHOLARSHIP AWARD

The following criteria will be considered for scholarships: academic achievement, school and community service, and financial need.

AWARD

1st Place \$5,000.00
2nd Place \$3,500.00
3rd Place \$2,000.00
Honorable Mention(s) \$500.00

REQUIREMENTS

Applicant Qualifications:

1. Entering freshman through senior year in college.
2. Course of study related to the field of Public Service.
3. Ventura resident or have graduated from a high school in Ventura within the past three years, or Ventura Police Department employee or employee's child.
4. Grade point average of 3.0 or better (based on a 4.0 system).
5. Maintenance of a GPA of 3.0 or better if selected as a recipient.
6. Scholarship is to be used for scholastic or vocational fields only.
7. Applicant must submit a resume of school and community activities and include a copy of official transcripts through the most recent semester.
8. Applicant must submit a typed essay of 1000 words or less on: "Service, what it means to me."
9. A letter of recommendation from a public servant.
- 10. All of the above must be completed and included with the application or the applicant will be disqualified.**
11. Complete applications must be returned (postmark acceptable) **no later than April 12, 2019 (no exceptions)**. Please send the application and required materials to Ofc. Mike Hibdon, Ventura Police Department, 1425 Dowell Dr., Ventura CA 93003.

MUST BE RETURNED OR POSTMARKED BY APRIL 12, 2019.

VENTURA POLICE OFFICERS ASSOCIATION

SCHOLARSHIP APPLICATION

Applicant's Name: _____ DOB: ____ / ____ / ____ Age: ____ Phone: (____) _____

Address: _____ City: _____ State/Zip: _____

Date of Graduation: _____ School Currently Attending: _____

Father's Name: _____ Phone: (____) _____

Address: _____ City: _____ State/Zip: _____

Employer: _____ Position: _____

Mother's Name: _____ Phone: (____) _____

Address: _____ City: _____ State/Zip: _____

Employer: _____ Position: _____

College or Institution: Applying (attach complete list) Accepted Attending

Name: _____ Address: _____ City/State/Zip: _____

Date You Plan To Start: ____ / ____ / ____ Course of Study: _____ Degree/Objective: _____

Desired occupation after graduation: _____

List all scholarships/grants applied for (attach additional pages if needed): _____

List all scholarships/grants received and amounts: _____

Briefly outline your anticipated expenses (lodging, meals, transportation, etc.) _____

Briefly outline how you are going to offset these expenses: _____

The above statements are correct and true. In the event the recipient drops out of school within any scholarship year and/or fails to maintain a 3.0 grade point average, all scholarship monies may be discontinued and will be repaid. I have read and understand the above and agree to abide by its content.

Applicant's Name (printed) _____ Signature: _____ Date: _____

Parent's Name (printed) _____ Signature: _____ Date: _____

Please send application and required materials to:
Ofc. Mike Hibdon, Ventura Police Department, 1425 Dowell Dr., Ventura CA 93003

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