

CALIFORNIA NARCOTICS OFFICER'S ASSOCIATION
REGION VII



ENRIQUE "KIKI" CAMARENA SCHOLARSHIP

SCHOLARSHIP GUIDELINES

The California Narcotics Officer's Association (CNOA) Region VII Enrique "Kiki" Camarena Scholarship Fund was established to assist CNOA members and their dependents with the opportunity to attend a college or university. The number of these \$500 scholarships awarded shall be determined by the CNOA Region VII Executive Board. This scholarship was established in memory of former Fresno DEA Special Agent Enrique "Kiki" Camarena and is meant to serve as a living memorial to Agent Camarena.

REQUIREMENTS FOR APPLICANTS:

- Applicant must be a dependent of a current CNOA Region VII member.*
- Applicant must be a senior in high school and have a minimum grade point average of 3.0. Transcripts are to be submitted with the application. Transcripts do not have to be sealed; a copy is fine.*
- Applicant must be enrolled in or have an application pending at a college or university. In the event an applicant does not enter a college or university in the year the scholarship is awarded, he/she shall reimburse said award back to CNOA Region VII.*
- Applicant shall submit two (2) forms of recommendation from a teacher, counselor, or employer with knowledge of the applicant. Persons submitting recommendations may not be related to the applicant.*
- Applicant shall submit a current photograph (2x3 preferred) with their application.*

SELECTION OF SCHOLARSHIP RECIPIENTS:

The CNOA Region VII Chairperson shall act as the committee chairperson for the Region VII Scholarship Fund. The chairperson shall select two additional members to comprise a committee that shall review the submitted applications and select the recipients based on the following criteria:

1) Academic Achievements 2) Community Activities 3) Merit

The number of scholarships awarded will be determined by the CNOA Region VII Executive Board. The CNOA Region VII Scholarship Fund does not discriminate on the basis of sex, race, or religion in the selection of applicants for the scholarship awards.

SUBMIT APPLICATIONS TO:

Hand deliver or mail completed application to:

CNOA Region VII
KIKI Scholarship
1735 "E" Street
Fresno, CA 93706

Applications must be received no later than May 15th of each calendar year to be considered. Awards are typically distributed by June 30th of each calendar year. If you have any question, please contact the region board at cnoaregion7@gmail.com or call (559) 753-3813

ENRIQUE "KIKI" CAMARENA SCHOLARSHIP APPLICATION		
APPLICANT INFORMATION		
Name:		
Date of birth:	Email:	Phone:
Current address:		
City:	State:	ZIP Code:
CNOA MEMBER INFORMATION		
Name:		
Employer:	Phone:	Email:
FIANCIAL STATEMENT		
Names and ages of siblings still living at home:		
Number of siblings now attending college:		

ENRIQUE "KIKI" CAMARENA SCHOLARSHIP APPLICATION

How do you plan to pay for college: % Scholarships % Grants/Financial Aid
 %Employment

% Parents % School Loans % Other

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

List all grants/scholarships awarded and amounts:

ACADEMIC INFORMATION

High School:

Date of graduation:

Current GPA:

College/University you are planning to attend:

Field of study:

Have you been accepted:

If yes, attach copy of acceptance letter.

What are your career goals:

EXTRA CURRICULAR ACTIVITY

List your school activities, years served, and involvement:

ACTIVITY	YEARS SERVED	INVOLVEMENT

COMMUNITY SERVICE

List your community service activities:

ENRIQUE "KIKI" CAMARENA SCHOLARSHIP APPLICATION

AWARDS & RECOGNITIONS

List all awards and recognitions you received in high school:

SIGNATURES

I hereby authorize release of this scholarship application, references, and academic record to the scholarship committee. I certify that all information provided by me is true and correct to the best of my knowledge.

Signature of applicant:

Date:

Signature of CNOA member:

Date:

RECOMMENDATION FORM

Applicants name:

Between what dates has your contact with the applicant occurred?

In what capacity has this been?

Please provide additional information about the applicant's qualifications and personal characteristics. What are the applicant's greatest strengths? Do you believe the applicant has the potential to achieve his/her stated goals relative to those strengths? Include your knowledge of the applicant's academic achievement, leadership roles, school service, community service, and employment record.

Name of evaluator:

Position:

Employer:

Address:

City/Zip:

Phone:

Email:

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