Detective Michael David Davis, Jr. was shot and killed on October 24, 2014, during a manhunt to arrest a carjacker who earlier had murdered Sacramento’s County Sheriff’s Deputy Danny Oliver.

Jessica Davis, wife of Detective Michael Davis, described her husband as follows, “He served his community with everything that he had. He was a husband and he loved so hard. He was a father who adored all of his children and a coach who mentored other’s children. It was just part of him but when it came to me he was always a great protector. That I’m grateful for because eight years doesn’t seem long enough. But they were pretty amazing. Everything was always full force and go. He always said that tomorrow wasn’t promised to us. He was my best friend and my hero. And now he’s everybody’s hero. But it’s not good-bye. It’s just see you later. I love you.”

Detective Davis had served with the Placer County Sheriff's Department for 15 years.  
  
Detective Davis' father, Investigator Michael David Davis Sr., was killed in the line of duty on October 24th, 1988, while serving with the Riverside County Sheriff's Department. Their line of duty deaths occurred exactly 26 years apart to the day.

1. Two $5000 Scholarship(s) will be awarded so please fill out the entire application to the best of your ability. Then print. Do not leave any answers blank. If you are unable to answer a question, please state the reason why.
2. Attach 2 letters of recommendation to the application. One letter of recommendation should be from the sponsoring Law Enforcement Agency and one letter of recommendation can come from teachers, coaches, employers, community service supervisors, etc.
3. Request one **official** transcript from the Counseling Office and attach it to your application. The transcript should be in a sealed envelope.
4. Applicants must have a 2.5 GPA or higher to be eligible for consideration.
5. Attach a photograph to your application.
6. Support is available for full or part-time students attending or interested in attending accredited programs at any of the educational institutions listed below, in order of preference:
   1. State supported colleges or universities
   2. State supported community colleges
   3. Technical/vocational schools
   4. Private colleges or universities
   5. For Profit schools
7. Return completed application to

**Captain Dean Worthy**

**Ventura County Sheriff’s Office**

**California Homicide Investigators Association – Scholarship**

**800 S. Victoria Av.**

**Ventura, CA 93009**

***Helpful hints:***

1. Ask for letters of recommendation as soon as possible. You should give your references at least 2-3 weeks to complete the letter.
2. Be sure that your photo is appropriate. (It is not advised that you use a picture from a dance or with other people in it.) The photo should be clear.

**\*\*\*REFER TO WEBSITE FOR LAST DAY TO APPLY!**

**Incomplete applications will not be accepted.**

Please contact your sponsor or a CHIA representative if you have any questions. Good luck!

(Name of Current School)

PLACE CURRENT PHOTO HERE

PLEASE DO NOT USE STAPLES AND TAPE ALL EDGES DOWN SECURELY

FIRST NAME MIDDLE LAST NAME

STREET CITY ZIP

BIRTHDATE:

PHONE NUMBER:

EMAIL ADDRESS:

***LIST COLLEGE CHOICES IN ORDER OF PREFERENCE:***

COLLEGE NAME / LOCATION

**1.**

**2.**

**3.**

**4.**

**5.**

COURSE OF STUDY:

DESCRIBE YOUR CAREER PLANS AND REASON:

PARENTS/GUARDIANS WITH WHOM YOU LIVE:

MOTHER/GUARDIAN:       FATHER/GUARDIAN:

PLACE OF EMPLOYMENT:       PLACE OF EMPLOYMENT:

CITY OF EMPLOYMENT:       CITY OF EMPLOYMENT:

JOB TITLE:       JOB TITLE:

AGES OF BROTHERS/SISTERS:       NUMBER OF BROTHERS/SISTERS IN COLLEGE:

NUMBER OF DEPENDENTS IN YOUR HOME (INCLUDE YOURSELF, BUT NOT YOUR PARENTS):

TWO PERSONS FURNISHING LETTERS OF RECOMMENDATION FOR THIS APPLICATION:

NAME ADDRESS POSITION



**ACTIVITIES**

NAME:

List activities and offices held in school and in the community. Include such involvement as athletics, student government, volunteer work, church, and paid employment.

**School Related Activities: 9 10 11 12 13+**

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**Leadership: 9 10 11 12 13+**

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**Athletics: 9 10 11 12 13+**

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**Honors/Awards**

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NAME:

Eligible applicants must be attending or have been accepted to attend one of the above listed educational institutions and submit at **minimum a 400-word** essay detailing **future life goals**.

**Additional Information**

**Work Experience:** (Paid employment only, include place, type of work and period of employment)

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**Community/Volunteer Service:** (outside of school activities)

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| --- | --- | --- | --- | --- |
| Name of Organization | Job Description | Grade levels of participation | Number of weeks per school year | Hours per Week |
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Please describe your community service/volunteer work and what it has meant to you.

Please provide additional information concerning your need as you view it.

**Permission To Disclose**

Re: California Homicide Investigators Association – Permission To Disclose

To Whom It May Concern:

California Homicide Investigators Association is a California Not For Profit Corporation assisting me by providing higher education guidance and potential scholarship funding. In accordance with the Family Educational Rights and Privacy Act (FERPA), I the undersigned, hereby grant the following:

1. To California Homicide Investigators Association and their representative’s full access to any and all educational, testing, grading or related academic information about me;

And

1. To any academic or related institutions that hold such information, I release any responsibility or liability resulting from the release of this information to California Homicide Investigators Association or their representatives.

I confirm my agreement to disclose this information as granted herein with my signature below.

Sincerely,

Printed Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature \* Date

\*Signature of parent is required for students younger than 18. Students who are 18 years of age may sign this release.

**Photo/Video Release Form**

For valuable consideration, I authorize California Homicide Investigators Association, and those acting pursuant to its authority to:

1. Record my participation and appearance on videotape, audiotape, film, photograph or any other medium.
2. Use my name, likeness, voice and biographical material in connection with these recordings.
3. Exhibit or distribute such recording in whole or in part without restrictions or limitation for any educational or promotional purpose, which California Homicide Investigators Association, and those acting pursuant to its authority, deem appropriate.
4. Exhibit or distribute any written documentation in whole or in part without restrictions or limitation for any educational or promotional purpose, which California Homicide Investigators Association, and those acting pursuant to its authority, deem appropriate.
5. All recordings (videotape, audiotape, film, photograph or any other medium) taken by the California Homicide Investigators Association will remain the sole property of the California Homicide Investigators Association.

This release shall remain in effect unless revoked in writing.

Name:

Address:

Phone No.:

Email:

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

Parent/Guardian Name (if under 18):

Parent/Guardian Signature (if under 18): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_