



APPLICATION

Name _____

Company/Organization _____

Mailing Address _____

Email _____

Phone _____

Do you live within the Abilene city limits? Yes No

How long have you been a resident of Abilene? _____

Tell us why you are interested in participating in the Abilene Academy. _____

What do you hope to gain from attending the Abilene Academy? _____

What would you do to build a greater sense of community in Abilene? _____

Tell us more about yourself (community involvement, interest, etc). _____

Can you commit to attending each session? Yes No

Shirt size _____

Abilene Academy applications
are due by January 26, 2018 to
Mindy Patterson

BY EMAIL
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BY MAIL
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