



ENGAGE DODGE APPLICATION

Name (First, Last)* _____

Are you 18 years or older* **YES OR NO**

Street Address* _____

City* _____

Zip Code* _____

Phone Number* _____

Email* _____

How long have you lived in Dodge City?* _____

Why are you interested in the Engage Dodge Program?*

What do you feel is the biggest challenge and/or opportunity facing our community today?*

What questions do you have about the City of Dodge City that you hope to have answered during this program?*

