

JOHN KITT MEMORIAL SCHOLARSHIP
2026-2027

Name: _____

College or University: _____

School Address: _____

Permanent Address: _____

Email: _____

Phone: _____

Current GPA: _____ on a scale of _____

Planned Graduation Date: _____

Major: _____

Advisor: _____

How did you learn of our scholarship? _____

Have you ever participated in a national or regional AACT event? _____

If so, which event? _____

If selected, will you be attending the National Technical Seminar? _____