

ORE FACULTY / STAFF FAVORITES

Please complete this form so our PTO and parents can know a little about your favorite things in life!

Name: MONICA JONES

Initials: MJ

Birthday: 12/25/65

Anniversary: 6/6/86

Allergies:

YOUR FAVORITES

Teacher Supplies: Target G.C. /

Color(s):

Candle or Scentsy

Scent: No

Lotion:

Sweet Treat: please don't feed the pig

Candy:

Salty Snack:

Fast Food:

Cold Drink:

Hot / Warm Drink: tea

Casual Dining:

Formal Dining:

Hobbies:

Magazine:

Book Genre:

Author:

Music, Music Group/
Artist:

Sports Team(s):

Way to relax:

Flower: tulips

Fragrance:

Store(s):

PREFERENCES:

Donuts or bagels: Donut

Coffee or Tea:
(iced or hot?)

Thank you, but I do
not need any more:

Wish List for the
Classroom (or
yourself.)