

PTO Getting To Know You 2024-2025

Let us know a little about you!

First & Last Name *

Chrissy Keith

Your Campus Building Location *

Elementary

Middle School

High School

Other: _____

Your Birthday *

MM DD YYYY

04 / 09 / 1979

Grade(s)/Classes Taught or Job Title *

Admin

Favorite Color *

Black or Purple

Favorite Candy *

Hershey's with Almonds

Favorite Scent *

Florals

Favorite Cookie *

Chocolate Chip

Favorite Coffee or Tea *

Chai tea latte with oat milk or unsweet tea

Favorite Drink *

HTeaO Sweet Regular

Favorite SONIC Drink *

Unsweet tea or cherry coke

Favorite Restaurant *

Newk's

Favorite Snack *

Baked Lays or Chocolate

Favorite Gift Cards *

Amazon or Target

Favorite Hobby *

Reading

Is there anything that you prefer not to receive, are allergic to, or simply have too much of?

No

Which of the following describes you? Check all that apply. *

Gluten Free

Dairy Free

Sugar Free

Nut Free

No dietary restrictions

Other:

WISH LIST:

*

Please, list some items for your classroom/workspace. (Things for this list could be items for rewards, decorations, supplies, etc.)

N/A

Is there anything else that you would like us to know about you?

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This form was created inside of Arkansas Christian Academy.

Google Forms