

# PTO Getting To Know You 2024-2025

Let us know a little about you!

**First & Last Name \***

Jackie Barner

**Your Campus Building Location \***

Elementary

Middle School

High School

Other: \_\_\_\_\_

**Your Birthday \***

MM DD YYYY

11 / 14 / 1980

**Grade(s)/Classes Taught or Job Title \***

School Counselor

**Favorite Color \***

Pink

**Favorite Candy \***

Turtles

**Favorite Scent \***

A Thousand Wishes - bath & body works

**Favorite Cookie \***

Chocolate chip

**Favorite Coffee or Tea \***

Drops of Heaven-Koffee with a kause

**Favorite Drink \***

Water with lemon

**Favorite SONIC Drink \***

Cherry vanilla coke

**Favorite Restaurant \***

Senior Tequila

**Favorite Snack \***

Chex mix

**Favorite Gift Cards \***

Koffee with a Kause, Olive Garden, senior tequila

**Favorite Hobby \***

Hanging with my husband and kiddos

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

.....

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

Gluten Free

Dairy Free

Sugar Free

Nut Free

No dietary restrictions

Other: .....

**WISH LIST:**

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

I can always use more sticky notes :) .....

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

I love you guys! Thank you for all you do! .....

This form was created inside of Arkansas Christian Academy.

Google Forms