

# PTO Getting To Know You 2024-2025

Let us know a little about you!

**First & Last Name \***

Jennifer Lattin

**Your Campus Building Location \***

Elementary

Middle School

High School

Other: .....

**Your Birthday \***

MM DD YYYY

08 / 05 / 1978

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

Dean of Students

**Favorite Color \***

Anything bright!

**Favorite Candy \***

Turtles or Fruity candy

**Favorite Scent \***

Clean scents

**Favorite Cookie \***

Like em all!

**Favorite Coffee or Tea \***

Caramel coffee (cloud nine w/oat milk at Koffee with a Kause)

**Favorite Drink \***

Coke or Sprite

**Favorite SONIC Drink \***

Blackberry mango water or soda (above)

**Favorite Restaurant \***

Blue House Bakery, Mexican, Italian

**Favorite Snack \***

Anything is great!

**Favorite Gift Cards \***

Amazon

**Favorite Hobby \***

Sleeping, spending time with family

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

N/A

**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.)**

Treasure box items .....

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

I love ACA & I am grateful to be here!!! .....

This form was created inside of Arkansas Christian Academy.

Google Forms