

PTO Getting To Know You 2025-2026

Let us know a little about you!

Email *

kpetty@archristian.org

First & Last Name *

Krista Petty

Your Campus Building Location *

Elementary

Middle School

High School

Other: _____

Your Birthday *

MM DD YYYY

03 / 19 / 1985

Grade(s)/Classes Taught or Job Title *

All/ Music- Praise & Worship

Favorite Color *

Purple

Favorite Candy *

Dark chocolate

Favorite Scent *

Citrus and/or mint

Favorite Cookie *

gluten free chocolate chip or snickerdoodle

Favorite Coffee or Tea *

cold brew or matcha

Favorite Drink *

coffee

Favorite SONIC Drink *

unsweet strawberry tea

Favorite Restaurant *

Tacos 4 Life

Favorite Snack *

Dark chocolate almonds

Favorite Gift Cards *

Lokal Koffee, Amazon, Chick-Fil-A

Favorite Hobby *

travel

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

Unfortunately, I'm allergic to most scented wax melts/ plug-ins.

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.)

Open to suggestions ... :)
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Is there anything else that you would like us to know about you?

I love music, of course, but I also love sports (former competitive gymnast). When I have time, I also enjoy dog sitting or fostering.
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This form was created inside of Arkansas Christian Academy.

Google Forms