PTO Getting To Know You 2024-2025

Let us know a little about you!

First & Last Name * Marilyn Black
Your Campus Building Location *
Elementary
Middle School
O High School
Other:
Your Birthday * MM DD YYYY 08 / 12 / 1961
Grade(s)/Classes Taught or Job Title * Aide to k-1st

Favorite Color * Purple
Favorite Candy * Plain m&m
Favorite Scent * Lavender
Favorite Cookie * Fudge stripe cookie
Favorite Coffee or Tea * Earl grey
Favorite Drink * Half unsweet/ half sweet tea
Favorite SONIC Drink * Water with peach

Favorite Restaurant * Newk's
Favorite Snack * Dots original pretzels
Favorite Gift Cards * Kroger, whataburger
Favorite Hobby * Sewing
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: Please, list some items for your classroom/workspace. (Things for this list could be items for rewards, decorations, supplies, etc.) Treasure box items for my teachers
Is there anything else that you would like us to know about you?
Is there anything else that you would like us to know about you? This form was created inside of Arkansas Christian Academy.
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