PTO Getting To Know You 2024-2025

Let us know a little about you!

First & Last Name * Miranda Elizondo
Your Campus Building Location *
Elementary
Middle School
High School
Other:
Your Birthday * MM DD YYYY 07 / 07 / 1989
Grade(s)/Classes Taught or Job Title * Kindergarten Teacher

Favorite Color *
Purple and Teal
Favorite Candy * Lillys chocolate and Giggles
Favorite Scent * lavendar and mint
Favorite Cookie * N/A
Favorite Coffee or Tea *
Regular Sweet Tea or Sweet Mint (HTeaO is my Fav)
Favorite Drink *
Poppi or HTeaO
Favorite SONIC Drink *
Water with Strawberry and Lemon

Favorite Restaurant *
Tacos for Life
Favorite Snack *
N/A
Favorite Gift Cards *
Amazon, Target, Hobby Lobby, Mardels,
Favorite Hobby *
Singing, Bible Study, Football (watching)
Is there anything that you prefer not to receive, are allergic to, or simply have too much of?
I can not do heavy scents so candles that smell "loud" and I have very sensitive skin so no scented lotions

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.) glue dots, cardstock, art supplies (for art center), water bottle stickers, games (for centers)
Is there anything else that you would like us to know about you? Dallas Cowboys Fan and lover of cows
This form was created inside of Arkansas Christian Academy.
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