

PTO Getting To Know You 2024-2025

Let us know a little about you!

First & Last Name *

Nichole Roberts

Your Campus Building Location *

Elementary

Middle School

High School

Other: _____

Your Birthday *

MM DD YYYY

10 / 19 / 1983

Grade(s)/Classes Taught or Job Title *

High School Biology and Physical Science

Favorite Color *

Green

Favorite Candy *

Plain M&Ms

Favorite Scent *

Eucalyptus

Favorite Cookie *

Chocolate chip

Favorite Coffee or Tea *

French Vanilla Coffee

Favorite Drink *

Lemonade

Favorite SONIC Drink *

Lemonade

Favorite Restaurant *

Texas Roadhouse

Favorite Snack *

Gardetto's

Favorite Gift Cards *

Kroger, Amazon, McDonald's, Panda Express

Favorite Hobby *

Hiking

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

No

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.)

hanging file folders, multi-colored pens and sharpies, organizational supplies

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

I have 3 children and a dog.

This form was created inside of Arkansas Christian Academy.

Google Forms