

PTO Getting To Know You 2024-2025

Let us know a little about you!

First & Last Name *

Paula Thornton

Your Campus Building Location *

Elementary

Middle School

High School

Other:

Your Birthday *

MM DD YYYY

09 / 09 / 1972

Grade(s)/Classes Taught or Job Title *

Academic Advisor, SKILS Director

Favorite Color *

Yellow

Favorite Candy *

Sugar Free Chocolates

Favorite Scent *

tropical

Favorite Cookie *

Sugar free, gluten free any cookie

Favorite Coffee or Tea *

Sugar free iced coffee, any flavor

Favorite Drink *

Unsweetened Tea

Favorite SONIC Drink *

Lemon Berry Water

Favorite Restaurant *

Texas Roadhouse

Favorite Snack *

Chips

Favorite Gift Cards *

Hobby Lobby, Mardel

Favorite Hobby *

Boating, Camping

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

Candy unless it's sugar free, coffee mugs/tumblers

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.)

Stickers, nice pens, single subject/wide ruled notebooks, red folders, apple themed decor

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

I have two yorkies that are my babies!

This form was created inside of Arkansas Christian Academy.

Google Forms