

PTO Getting To Know You 2025-2026

Let us know a little about you!

Email *

highschool@archristian.org

First & Last Name *

Tracy Cochran

Your Campus Building Location *

Elementary

Middle School

High School

Other: _____

Your Birthday *

MM DD YYYY

01 / 06 / 1977

Grade(s)/Classes Taught or Job Title *

HS Administrative Assistant

Favorite Color *

Red

Favorite Candy *

Baby Ruth

Favorite Scent *

None

Favorite Cookie *

Chocolate oatmeal (no bake) cookie

Favorite Coffee or Tea *

Sweet tea

Favorite Drink *

Sonic or CFA Sweet tea

Favorite SONIC Drink *

Sonic Sweet Tea

Favorite Restaurant *

Bonefish Grill

Favorite Snack *

Come and peanuts

Favorite Gift Cards *

Amazon, Hobby Lobby

Favorite Hobby *

Chunky Knit blankets, scrapbooking

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

Candles due to smell sensitivity

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.)

holiday/seasonal themed decor, Sharpie pens

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

It's my second year at ACA

This form was created inside of Arkansas Christian Academy.

Google Forms