

These are a few of my FAVORITE THINGS

Dear Teacher/Staff Member,

Please fill out this questionnaire so we can get to know you better! -PTA

Name: Lisette Drengo Grade/Position: SNS

Birthday(mm/dd): 1/2/75 Shirt Size: M

Monogram (or name preference for monogrammed items) : _____

My absolute
Favorite...



Color: Purple Scent: Cinnamon Flower: Rose

Coffee Drink: NO Cold Drink: Water Soft Drink: _____

Food: Latin Food Fruit: Strawberry Salty Snack: Chips

Candy: _____ Cookie: Chocolate Chips Homemade Treat: _____

Fast Food: Chick-Fill-A Take Out Restaurant: _____

Sit Down Restaurant: Chili's Coffee Shop: _____

Do you have any dietary restrictions: Low Carbs

Places to Shop: _____ Bookstore: _____

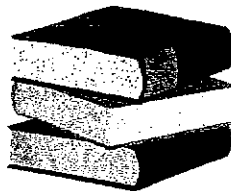
Places for a Gift Card: Marshalls Nail Salon: _____

Hobby: _____ Professional Sports Team(s): _____

University: _____ Other Favorite Things: _____

My classroom

Wish List...



My personal

Wish List...

My classroom parents can help me most by: _____
