

These are a few of my
FAVORITE THINGS...

The PTO would like to know more about you! This form will be placed in the office in a notebook and a copy will be given to your room parent.

Name: Jim McAlister Birthday: 10-19-56
Position/Grade: T.A. Allergies: —
Email Address: jimmcalister56@gmail.com Phone #: —
(optional) (optional)

COLOR: DARK GREEN

CANDLE: —

CANDY: PAYDAY

DRINK: GATORADE O

K-CUP: —

SPORT/TEAM: TARHEELS/PANTH

CLASSROOM SUPPLY: — CRS

ANYTHING STORE: GOLF BALLS

FLOWER: —

ICE CREAM: —

SNACK FOOD: NUTS

SWEETS/TREATS: —

FRUIT: RAISINS

GIFT CARD: LOWES

SCHOOL SUPPLY STORE: —

T-Shirt Size: LARGE

Hobby/interest outside of school:

GOLF, GARDENING

What things would make your classroom better for you?

—

Is there anything you always have a need for or can never have too much of?

—

Is there anything you prefer not to receive or have too much of?

—

What is your favorite lunch food/order?

CHICK FILA — THIN CRUST PIZZA

What is your favorite breakfast food/order?

SAUSAGE BISCUIT

What is your favorite coffee/tea order?

REGULAR COFFEE

Food likes/dislikes:

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