

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: Debbie Taggio Birthday: 3/5
Position/Grade: EC/PK Allergies: None
Email Address: deborah.taggio@ucps.k12.nc Phone #: _____
(optional) (optional)

COLOR: Blue/Burgundy

CANDLE: any scent

CANDY: dark choc./ non-pareils/sweedish Fish

DRINK: pure leaf tea / water

K-CUP: Hot choc.

SPORT/TEAM: NY Giants

CLASSROOM SUPPLY: Markers/velcro

ANYTHING STORE: Target

FLOWER: any flower

ICE CREAM: Vanilla

SNACK FOOD: Cheddar Popcorn/Cheetos

SWEETS/TREATS: donuts/cupcakes

FRUIT: Bananas/Apples

GIFT CARD: Starbucks/Chick-fil-a

SCHOOL SUPPLY STORE: Walmart

T-Shirt Size: M (S if shirt runs big)

Hobby/interest outside of school: 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? markers/tissues/velcro

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

What is your favorite lunch food/order? Chick fil a sandwich/ Chinese- Chick + Broc/ Pizza

What is your favorite breakfast food/order? Banana-Blueberry muffin/ Cinn. Bagel/

What is your favorite coffee/tea order? Hot tea w/ Cream

Food likes/dislikes: