

# A Few of My Favorite Things...

Please consider completing this form so we can share the results with your student's parents or guardians.

What is your favorite restaurant for a quick meal? \*

Jersey Mike's

What is your favorite restaurant to splurge at? \*

Ashtens

Favorite beverage? (hot, cold, off the clock) \*

Seltzer water, Diet Dr. Pepper, Wine

What is your favorite snack? (Salty, Sweet, Healthy etc) \*

dark chocolate, white cheddar popcorn

Favorite Sports Team?

Favorite past time or hobby?

Gardening, Painting, Travel

Favorite Book or Author?

Favorite Flower or Plant?

Herbs and all flowers

Favorite scent? (candle, lotions etc.) \*

Lavender

Do you Collect Anything? \*

No

Favorite Classroom Supply Item (brand of pen, marker, something you wish you had!) \*

Cleaning wipes, black Sharpie markers, erasers

What is your favorite way to relax?

Aromatherapy Bath

What makes you smile? \*

Cards

Anything else you'd like us to know? \*

My students enjoy animal drawing books!

What is your shirt/jacket size? \*

Med.

Your name \*

Mrs. Hill

Grades/Subjects You Teach \*

Art Teacher K-8

Any Allergies or Dietary Restrictions/Preferences? \*

None

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