reatHearts ORTH PHOENIX ARCHIVAT	favorite things faculty questionnaire
Name: <u>Kyle Burgett</u> Birthday: (year not required) <u>08-20-1984</u>	— Grade/Position: 31d TA
What is.	your favorite
Salty Snack: Salty Pistachios Sweet Snack: Hi-Cheus	Any dietary restrictions? Gluten Dairy Other (please list)
Coffee and/or Tea Drink: Coffee Black N' Sug	a/
Soda or Other Drink: Roof Beec	This or that? salty or sweet
Restaurant: In N Out	coffee or tea
riace to Shop: Don't Shop	hot or cold (drink) book or movie
Bookstore: Barnes N Noble	eat out or eat at home
Flower: Poppy Hower	candle or lotion *leave blank if you prefer neither
Hobby: Gamer PUBG and Go	Anything else we should know?
Scent: Man Simel	
Sports Team: Cordinal S	
Teacher Supply Store: (where you get most supplies from	011=
Is there anything you would prefer not to	receive/already have enough of?
you were to receive a gift card in the amount listed belo	ow, please indicate from where you would prefer:

PLEASE RETURN THIS COMPLETED FORM TO MS. DEL DUCA.