



# These are a few of my favorite things!



faculty questionnaire

Name: \_\_\_\_\_ Grade/Position: \_\_\_\_\_

Birthday: (year not required) \_\_\_\_\_ Shirt Size: \_\_\_\_\_

♥ what ♥ is ♥ your ♥ favorite... ♥

Color: \_\_\_\_\_ Fruit: \_\_\_\_\_

Salty Snack: \_\_\_\_\_ Sweet Snack: \_\_\_\_\_

Candy/Gum: \_\_\_\_\_ Baked Good: \_\_\_\_\_

Coffee and/or Tea Drink: \_\_\_\_\_

Soda or Other Drink: \_\_\_\_\_

Restaurant: \_\_\_\_\_

Place to Shop: \_\_\_\_\_

Sports Team: \_\_\_\_\_

Coffee Shop: \_\_\_\_\_

Flower: \_\_\_\_\_ Book Store: \_\_\_\_\_

Hobby: \_\_\_\_\_ Scent: \_\_\_\_\_

Favorite Book/Author: \_\_\_\_\_ Teacher Supply Store: \_\_\_\_\_

Please list any dietary restrictions or allergies: \_\_\_\_\_

Classroom Wish List: \_\_\_\_\_

If you were to receive a gift card in the amount listed below, please indicate from where you would prefer:

\$5 \_\_\_\_\_ \$10 \_\_\_\_\_ \$25 \_\_\_\_\_