



# MY FAVORITE THINGS

DEAR TEACHER, WE ARE SO HAPPY TO BE IN YOUR CLASS THIS YEAR! WE WOULD LIKE TO KNOW A LITTLE BIT ABOUT YOU! PLEASE FILL OUT THIS QUESTIONNAIRE AND SEND IT HOME WITH: Email it back to me!

YOUR NAME: Sydney Jones

YOUR BIRTHDAY MONTH: October DAY: 3

FAVORITE PLACES TO SHOP: Target

FAVORITE RESTAURANTS: CAVA, Willy's

FAVORITE SNACK: pretzels FAVORITE CANDY: peppermint patty

FAVORITE COOKIE: Chocolate chip FAVORITE CAKE: chocolate with white buttercream

FAVORITE DRINK: \_\_\_\_\_ FAVORITE COFFEE DRINK: NA

ALLERGIES: Dairy, nuts

FAVORITE COLOR: Light pink FAVORITE FLOWER: Peony

FAVORITE SCENT: NA FAVORITE SPORTS TEAM: NA

HOBBIES: Reading, Gardening

DO YOU COLLECT ANYTHING? NA

## CLASSROOM WISH LIST

Markers, Colored Pencils  
\_\_\_\_\_  
\_\_\_\_\_