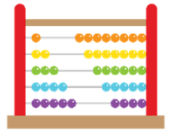




All about my TEACHER



NAME: _____ BIRTHDAY: _____

♥ My Absolute Favorites! ♥

SNACK: _____ SHIRT SIZE: _____
 ANIMAL: _____ COLOR: _____
 SINGER/BAND: _____ FAST FOOD: _____
 SPORTS TEAM: _____ CANDY: _____
 RESTAURANT: _____ DRINK: _____
 FLOWER: _____ MOVIE: _____
 BOOK GENRE: _____ HOBBIES: _____

This or That?

SALTY or SWEET
 VANILLA or CHOCOLATE
 COFFEE or TEA
 SILVER or GOLD
 BATH or SHOWER
 MOVIE or BOOK

Allergies:

Yes or No?

	Y	N
CANDLES	<input type="checkbox"/>	<input type="checkbox"/>
LOTIONS	<input type="checkbox"/>	<input type="checkbox"/>
BLANKETS	<input type="checkbox"/>	<input type="checkbox"/>
CALENDAR	<input type="checkbox"/>	<input type="checkbox"/>
VOUCHER	<input type="checkbox"/>	<input type="checkbox"/>
SOCKS	<input type="checkbox"/>	<input type="checkbox"/>

♥ More About Me ♥

I'M HAPPIEST WHEN: _____

IF YOU FOUND A GIFT CARD, WHERE WOULD YOU WANT TO SPEND IT?

\$10 _____

\$25 _____

\$50 _____

WISHLIST
For my classroom

