

Just a Few of My

FAVORITE THINGS



Name: _____ Grade: _____
Birthday (month/day): _____ Shirt Size: _____



Food/Drink

Drink: _____
Coffee/Tea Order: _____
Sweet Treat: _____
Salty Snack: _____
Allergies: _____



Just for Fun

Color: _____
Scent (if any): _____
Flower or Plant: _____
Book or Author: _____
Hobby or Way to Relax: _____



In the Classroom

Supplies You Always Need:

Classroom Wishlist Item(s):

Things You Love Getting from
Students/Families:



Stores & Shopping

Favorite Place to Shop:

Favorite Local Restaurant:

Favorite Online Store or Website:

Favorite Gift Card:



THANK YOU FOR SHARING YOUR FAVORITES!

