



Teacher's Favs!

Teacher Name: _____

•Favorite Color:

•Favorite Sweet Treat/Candy:

•Favorite Savory Snack:

•Favorite Coffee/Drink Order:

•Favorite Restaurant (for dine-in or takeout):

•Favorite Store or Gift Card Preference:

•Favorite Scent (candle, lotion, etc.) – or “no scents please”:

•Favorite Flowers or Plants (or “not a plant person”):

•Hobbies or Things I Enjoy in My Free Time:

•Classroom Wishlist Items or Supplies I Often Run Out Of:

Other Notes or Special Requests

(e.g., allergies, dietary restrictions, things I don't need more of):