Teacher Information Sheet

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Birthday:

Favorite Color:

Favorite Foods:

Favorite Places to eat out:

Favorite Places to shop:

Hobbies/Interests:

Do you have any pets?

Any Classroom Supply Needs?

Any Class Volunteer Needs?

Room parent needs/expectations:

I’m looking forward to being your Room Parent!

Sincerely,