

Resident Questionnaire and Profile:

To better assist us in matching you with other roommates, please fill out the answers to the following questions truthfully. While every effort is made to pair students with compatible roommates, roommate assignment preference or compatibility is not guaranteed. Specific request by applicants to exclude roommates for consideration based on race, color, religion, national origin, disability, military status, or other protected classes are to be disregarded. Roommates will be matched by sex, so all roommates in an apartment must either be male or female.

Name		Email			
Cell Phone	Major			City	
Please Check One: Private	Shared	I would li	ke to live v	with	
The information above, will be shared with friend request on face book.	n your roommates, so make sure	e to give the best e	email and phon	ne number for your new roommates to contact you or send	
General Questions about you:					
I consider myself to be:	O quiet		O noisy/lo	oud	
I consider myself to be:	O shy	~		O outgoing	
I consider myself to be:		light sleeper, I wake up to any noise		O sound sleeper, I can sleep through a lot of noise	
I consider myself to be:	O a "neat freak"			O a slob	
I think I would:	O compromise with roommates if we have different views on issues				
	O want things my way if my roommates and I have different views issues.				
I enjoy:	O staying up late		O going to bed early		
I think I will:	O go home most weekends		O stay at the apartment most weekends		
I would prefer my roommates:	O not to invite friends/guests into the apartment, I don't like entertaining.				
-	O to enjoy having friends and guest over, I love to entertain.				
I would prefer my roommates:	O not to borrow or use my stuff/food				
	O my roommates can borrow my stuff/food but I would prefer them asking first. O I love sharing all my stuff/food and hope they will too				
Smoking:			-		
Are you a smoker O Yes O No					
Can you live with a smoker, even if the	ev can not smoke in the an	artment O ves C	No (we do	not allow smoking in the building)	
Drinking:	, <u></u> up		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Do you drink alcohol? O Yes O No		1 . 11 . 1		***	
Can you live with someone who drink	s alconol? O yes O No (we	e do not allow alc	ohol in the bui	ilding)	
<u>Cleaning:</u>					
Having a clean room, living room and					
Having a clean bedroom and bathroom	n is important? O all t	he time O mos	t of the time	O sometimes O never	
In my spare time I look to do th	ne following: (check all	that apply to	vou)		
O Go out and party with friends				O have guests and friends over	
O Watch TV	O .	O hang out with boyfriend/girlfriend O read books		O go out to dinner	
Listen to music O study				O cook/bake	
O Entertain friends	O play video g	games		O just be by myself	
O Other					
My biggest pet peeve is:					
What things interest you the most	?				
What school groups/sports/orgar	nizations were you involv	ed in?			
What type of music do you listen t	o?				