

ROOMMATE INFO

ROOMMATE GENDER PREFERENCE: _____

SMOKING PREFERENCE: _____

WHEN IS YOUR EXPECTED GRADUATION: _____

CLASSIFICATION PREFERENCE: _____

AREA OF STUDY/MAJOR: _____

SOCIABILITY: _____

NEATNESS: _____

PET PREFERENCES: _____

GUEST VISITS: _____

INTERESTS: _____

WHAT ELSE WOULD YOU LIKE US AND/OR YOUR POTENTIAL ROOMMATES TO KNOW ABOUT YOU: _____

MY STUDY HABITS ARE: _____

DO YOU SMOKE: _____

IT BOTHERS ME IF OTHERS DRINK, SMOKE OR PARTY: _____

MY ALCOHOL CONSUPTION HABITS ARE: _____

APPLICANT

DATE