Lake Area Suites

ROOMMATE PREFERENCE QUESTIONNAIRE

# Applicant Field of Study

Please select the category for each statement that best represents what you would like to experience in a roommate:

I would like to live with someone who:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Not important****to me** | **Somewhat important to****me** | **Important to me** |
| Is a disciplined student who studies often? |  |  |  |
| Does not keep late hours. |  |  |  |
| Is in a similar field of study. |  |  |  |
| Is quiet and reserved. |  |  |  |
| Has an outgoing personality. |  |  |  |
| Is neat and organized. |  |  |  |
| Does not have a lot of visitors. |  |  |  |
| Doesn’t play loud music |  |  |  |
| Has an interest in music? *(Circle all that apply):*Classical Country Rock Rap Rock/Heavy Metal Easy Listening Alternative |  |  |  |
| Does not use tobacco products. |  |  |  |
| Has an interest in sports? |  |  |  |

Is there a medical condition or other medical information you would like us or a potential roommate to be aware of?

*(Circle one):* YES NO

If yes, please explain:

The information provided is meant to help the staff better assign roommates. However, please note that the preferences indicated above do not guarantee that you will be placed with roommates who meet your

exact preferences.

We would like you to remember that part of living in the Lake Area Suites involves being tolerant of other personalities and compromising when needed. The staff encourages you to keep an open mind.

APPLICANT SIGNATURE DATE

 \_ APPLICANT NAME APPLICANT PHONE NUMBER