



Residence Hall Questionnaire

Please answer these questions to the best of your ability.

Please circle your answers.

1. Do you consider yourself: Messy Neat
2. Do you want a roommate who is: Messy Neat
3. How often do you study? Very often Often Not that often
4. When do you prefer to study? Morning Afternoon Night
5. Where do you prefer to study? Room Library Other
6. What temperature do you prefer the room? Warmer Colder Doesn't matter
7. Do you consider yourself: Loud Quiet
8. Do you want a roommate who is: Loud Quiet
9. Do you want the area around your room to be: Loud Quiet
10. When do you go to bed? Before midnight After midnight Varies
11. Do you smoke? Yes No
12. Would you be willing to room with a smoker? Yes No Doesn't matter
13. I do not mind if my roommate's significant other spends time in the room: Agree Disagree
14. I do not mind if other people socialize in my room: Agree Disagree
15. I do not mind if my roommate borrows my belongings: Agree Disagree

Please use the space to fill out your answers. If you need more space, please use a separate piece of paper and attach to this application.

1. What type of music do you listen to? _____
2. What are some of your hobbies? _____
3. How would you react to someone on your floor playing loud music at 4:00 am?

4. How would you handle a conflict with your roommate?
