



## ROOMMATE INFORMATION QUESTIONNAIRE

NAME: \_\_\_\_\_

EMAIL: \_\_\_\_\_

CITY: \_\_\_\_\_

STATE: \_\_\_\_\_

WORK PHONE: (\_\_\_\_) \_\_\_\_\_

HOME PHONE: (\_\_\_\_) \_\_\_\_\_



NICKNAME: \_\_\_\_\_

AGE: \_\_\_\_\_

UNDERGRAD SCHOOL: \_\_\_\_\_

GENDER: \_\_\_\_\_

PREVIOUS LIVING ARRANGEMENT:  Alone  Roommate  With Parents  Family

DO YOU SMOKE?:  Yes  No DO YOU HAVE PETS?  Yes  No

WHAT KIND OF PET?:  Cat  Dog  Other:  
\_\_\_\_\_

WHAT ARE YOUR HOBBIES: \_\_\_\_\_

WHAT ARE YOUR STUDY HABITS:  I need absolute silence  I like background noise  
 I prefer to study at home  I prefer to study at school

WHAT IS YOUR HOUSEKEEPING STYLE:  Ultra clean  Out of sight/out of mind  Mini-Chaos

DO YOU PREFER:  Night owl  Early to bed, early to rise

Additional Comments: Please write any additional comments on the back of this form.

SIGNATURE: \_\_\_\_\_

*Your signature allows Valparaiso University School of Law to release the above information to prospective roommates.*

**Valparaiso University School of Law assumes no responsibility for providing roommates, nor does Valparaiso University School of Law assume responsibility for or make recommendations about the prospective students listed in the Roommate Guide.**