

We want you to be involved in selecting your roommates. We cannot guarantee that we will be able to satisfy your every preference, but we will do what we can in placing you in your new home. To assist us in locating the apartment to meet your wants, needs and/or most compatible roommate(s), please complete this form thoroughly and honestly.

NAME _____ AGE _____ GENDER _____
CELL PHONE # _____ HOME PHONE # _____ E-MAIL ADDRESS _____

Do you need our furniture? Yes / No
For matching purposes (if applicable), what furnishings will you be bringing for the common area?

If you are bringing roommates, please provide their names below:

- 1. _____
- 2. _____
- 3. _____

School _____ Academic year _____ Major _____

ROOMMATE MATCHING

Roommate preferences: (please check)
Males only _____ females only _____ no preference _____
Minimum roommate age: _____ maximum roommate age: _____

Lifestyle (please circle the answer that best describes you or fill in the blank):

Are you a smoker? Yes / No Do you smoke indoors? Yes / No
Will you live with a smoker? Yes / No
****Please note that NO SMOKING is allowed inside any apartment**

How often do you study? Every Day Weekdays Weekends Seldom Never

Do you drink? Every Day Weekends Special Occasions Seldom Never

Are you a member of a sorority, fraternity, or other student organization? Yes / No

If yes, please list _____

Would you consider yourself to be: Very Clean Somewhat Clean Messy Dirty

What type of music do you listen to? _____

What type of movies do you watch? _____

Hobbies _____

Pet peeves _____

Additional comments:

By signing you give Booth properties permission to release this information to perspective roommates.

SIGNATURE _____ DATE _____