

WESTMINSTER

COLLEGE

RESIDENCE HALL ROOMMATE PREFERENCE FORM

Check the semester(s) that you plan to attend: _____ Fall Semester, 20 _____ Spring Semester, 20 _____

Name: _____
 first middle last

Mailing Address: _____
 street city state zip code

Phone: (____) _____ Age: _____ Date of Birth: _____

Social Security Number: _____ Male/Female: _____

Classification: ___ New Freshman ___ Sophomore ___ Junior ___ Senior ___ Graduate

Do you have any disability that might affect your room assignment: Yes _____ No _____

If yes, please explain: _____

<p>Private rooms: Do you request a private room, if available, at the additional fee? Yes No <i>Due to the limited number of private rooms, we may need to place you in a double room. Please complete this form to make the process run smoothly for everyone involved.</i></p>

If you already have a preference on whom you would like to room with, please write their name below.

1. _____ 2. _____ 3. _____
4. _____ 5. _____

Please check items which describe you:	Please check items which describe what you prefer in a roommate:
<input type="checkbox"/> Smoker* <input type="checkbox"/> Non-Smoker* <input type="checkbox"/> Messy <input type="checkbox"/> Neat <input type="checkbox"/> Late to bed <input type="checkbox"/> Early to bed <input type="checkbox"/> Late Riser <input type="checkbox"/> Early Riser <input type="checkbox"/> Social Drinker** <input type="checkbox"/> Non-drinker** <input type="checkbox"/> In favor of opposite sex visitation <input type="checkbox"/> Opposed to opposite sex visitation	<input type="checkbox"/> Smoker* <input type="checkbox"/> Non-Smoker* <input type="checkbox"/> Messy <input type="checkbox"/> Neat <input type="checkbox"/> Late to bed <input type="checkbox"/> Early to bed <input type="checkbox"/> Late Riser <input type="checkbox"/> Early Riser <input type="checkbox"/> Social Drinker** <input type="checkbox"/> Non-drinker** <input type="checkbox"/> In favor of opposite sex visitation <input type="checkbox"/> Opposed to opposite sex visitation

Please list other items you think are important which are not listed: _____

(Note: It is understood that the above items are preferences only, and are not guaranteed.)

I give permission for the Westminster Student Life Office to release my home address and phone to my assigned roommate.

_____ signature

_____ date

*The residence halls at Westminster College are smoke free environments. There is no smoking allowed any place inside the buildings.

**Westminster College abides by Utah State Law - underage (under 21) drinking is prohibited on campus.