**ROOMMATE QUESTIONNAIRE**

Do NOT fill out this form if you do NOT want a roommate!

This questionnaire will aid our effort to help you find a compatible roommate. Please answer all questions honestly. Feel free to add explanatory comments whenever necessary.

1. If you already have a roommate, please indicate name(s): ____________________________________________________

2. Do you smoke?  Yes □  No □  Would you mind living with someone who does smoke?  Yes □  No □

3. Do you keep your room neat and orderly?  Yes □  No □  Would you mind living with someone who isn’t neat and orderly?

   Yes □  No □

4. How many people are in your family: ______

5. Will you be working while attending PCA&D?  Yes □  No □  Not Sure □

6. What time do you generally go to bed?

   Before 11 pm □  11 pm-12 midnight □  12 - 1 am □  After 1 am □

   What time do you generally wake up?

   Before 7 am □  7 - 8 am □  8 - 9 am □  After 9 am □

7. How much of your free time do you spend listening to music?

   Most of the time □  Occasionally □  Rarely □

8. What are your musical preferences? (i.e. ska, punk, rock, etc)

   ____________________________________________________

   ____________________________________________________

   ____________________________________________________

9. How much time do you spend watching television each day?

   Rarely □  1-3 hours □  3-5 hours □  5-8 hours □

   Give examples of your favorite TV shows and movies:

   ____________________________________________________

   ____________________________________________________

   ____________________________________________________

10. What are your food preferences? ________________________________
Are you a vegetarian? Yes □ No □

Do you have any food allergies? Yes □ No □ If yes, please list: ______________________________

11. Do you have any special conditions that would affect your housing assignment? (Ex: allergies, limitation of mobility, etc.) Yes □ No □
If yes, please explain: ______________________________

12. Please check all that describe your study habits:
Perfectionist □ I like to do what I need to get by □ Organized □ Disorganized □
Last-minute, stay up all night □ Plan ahead □ Like to study at night □ Like to study during the day □
Like to study with music □ Like to study in complete silence □ Like to study in groups □
Prefer to study alone □ Other: ______________________________

13. What are some of your extracurricular interests?
__________________________________________________________________________________________________

14. How do you feel about parties?
I love them! □ Once in a while, as long as they don’t get out of hand □ Not interested □
Ok, but not in my apartment □ Other: ______________________________

15. How do you feel about alcohol & other substances?
Fine □ Ok for other people, but not for me □ Never! □ Other: ______________________________

16. How do you feel about overnight guests in your apartment?
Friends of the same sex are ok □ Only during the weekend □ Anytime during the week □
Boyfriends and/or girlfriends are ok □ As long as it’s not all the time □ Other: ______________________________

17. Describe your personality (ex: independent, private, outgoing, etc.):
__________________________________________________________________________________________________
__________________________________________________________________________________________________

18. What are you looking for in a roommate?
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Any additional comments, questions, or concerns: _______________________________________________________________

Feel free to call 717-396-7833 ext 1018 or e-mail at HousingService@pcad.edu with your questions.
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