



ROOMMATE MATCHING FORM

Resident Information

Name: _____ Date of Birth: _____ / _____ /19 _____
 Cell Phone: (____) _____ - _____ MU E-mail Address: _____
 Home Phone: (____) _____ - _____ Personal E-mail Address: _____
 Gender: Male Female Preferred E-mail Address: MU Personal
 Current Class Standing: _____ Major(s): _____

Current Roommates

Name: _____ Phone: (____) _____ - _____
 Name: _____ Phone: (____) _____ - _____
 Name: _____ Phone: (____) _____ - _____

Preferences

The following information will be used for roommate matching only. Please complete this form as if you were talking to a prospective roommate; your honesty will benefit both you and your roommates. *Check all items that apply.*

Activities: Sorority/Fraternity Sports _____ MU Band Other _____

Smoking: I do not smoke. I smoke. I prefer non smokers

NOTE: Log Hill Properties are smoke free ; smoking is limited to outdoors

Alcohol: I drink. I do not drink. I cannot drink; I am not of age. I prefer non drinkers

	Where I Study	How Often I Study	When I Study
Studying:	<input type="checkbox"/> I prefer to study in my bedroom.	<input type="checkbox"/> I study 1-3 hours/day.	<input type="checkbox"/> I prefer to study at night.
	<input type="checkbox"/> I prefer to study at the library.	<input type="checkbox"/> I study less than 1 hour/day.	<input type="checkbox"/> I prefer to study midday.
	<input type="checkbox"/> I prefer to study in the living room.	<input type="checkbox"/> I study more than 3 hours/day.	<input type="checkbox"/> I prefer to study in the AM.

On most weeknights I (check all that apply):

Entertain Friends Listen to Music Work Party Study Watch TV

On most weekends I (check all that apply):

Entertain Friends Listen to Music Work Party Study Watch TV

Other people consider me to be:

Extremely Quiet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Really Outgoing
Immaculately Clean	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Very Messy
Morning Person	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Night Person

Pet preference: I have a pet I do not have a pet. I do not mind pets. I prefer no pets

Temperature: I prefer the apartment (circle): As *cold* as possible, 65-68, 69-72, 73-75, as *warm* as possible

My most important preference for matching is: Activities Smoking Alcohol
 Studying Personality Temperature

I give Log Hill Properties LLC. permission to release this information to prospective roommates.

Signature: _____

Date: _____