



Today's Date (MM/DD/YYYY): _____

Please send to ResLife@post.edu

Starting Semester: _____

Housing Request Application

Last Name	First Name	M.I.	Date of Birth (MM/DD/YYYY)
Address, City, State, Zip Code			
Cell Phone	Email Address		Gender Identification

To help us match you with a roommate, please complete this form below:

I am a: <input type="checkbox"/> Non-Smoker <input type="checkbox"/> Smoker	My roommate should be: <input type="checkbox"/> Non-Smoker <input type="checkbox"/> Smoker <input type="checkbox"/> Impartial	I usually go to sleep: <input type="checkbox"/> Early (9-10pm) <input type="checkbox"/> Middle (10-1am) <input type="checkbox"/> Late (1am- or later)
I usually get up: <input type="checkbox"/> Early (6-7am) <input type="checkbox"/> Middle (7-10am) <input type="checkbox"/> Late (10am or later)	I like a room that is: <input type="checkbox"/> Neat <input type="checkbox"/> Lived-In <input type="checkbox"/> Cluttered	I prefer: <input type="checkbox"/> Very Quiet <input type="checkbox"/> Quiet <input type="checkbox"/> Moderate
I prefer to study: <input type="checkbox"/> At the Library <input type="checkbox"/> In my room <input type="checkbox"/> Other	I prefer to study in the: <input type="checkbox"/> Early Morning <input type="checkbox"/> Afternoon (between class) <input type="checkbox"/> Early Evening <input type="checkbox"/> Late Evening	I am a: <input type="checkbox"/> First Year <input type="checkbox"/> Transfer <input type="checkbox"/> Prior Student Not in Housing

Do you have any allergies or any medical accommodations? Yes No

If yes, please explain: _____

**Medical documentation may need to be provided should special housing accommodations be required.*

List any team(s) you will be playing for: _____

List some of your extracurricular activities: _____

What qualities are you looking for in a roommate? _____

How would you describe yourself? _____

What kind of music do you like? _____

What kind of movies do you like? _____

Do you have any roommate requests? _____

**Requests will be honored if possible and only if all individuals request each other.*

Do you give Post University permission to release your phone and email to your roommate? Yes No