



# INDIVIDUAL LEASING QUESTIONNAIRE

NAME \_\_\_\_\_

CURRENT ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

GENDER (CIRCLE ONE) MALE FEMALE BIRTHDATE \_\_\_\_\_

NEXT YEAR IN SCHOOL \_\_\_\_\_ CURRICULUM \_\_\_\_\_

WOULD YOU PREFER TO LIVE WITH INTERNATIONAL STUDENTS? YES NO

DO YOU SMOKE? YES NO DO YOU MIND LIVING WITH A SMOKER? YES NO

DO YOU GO OUT ON WEEKENDS? YES NO WHEN AND HOW OFTEN? \_\_\_\_\_

DO YOU GO OUT ON WEEKNIGHTS? YES NO WHEN AND HOW OFTEN? \_\_\_\_\_

ARE YOU IN A SORORITY/FRATERNITY? YES NO IF YES, WHICH HOUSE? \_\_\_\_\_

DO YOU PLAN ON HAVING OVERNIGHT GUESTS? YES NO (SAME SEX OPPOSITE BOTH)

DO YOU MIND IF A ROOMMATE HAS OVERNIGHT GUESTS? YES NO (SAME SEX OPPOSITE BOTH)

DURING THE WEEK, WHAT TIME DO YOU GO TO SLEEP? \_\_\_\_\_ WAKE UP IN THE MORNING? \_\_\_\_\_

DO YOU HAVE A JOB? YES NO IF YES, WHERE? \_\_\_\_\_ WHAT ARE YOUR HOURS? \_\_\_\_\_

LIST ANY OTHER PREFERENCES OF WHICH YOU FEEL YOUR PROSPECTIVE ROOMMATE SHOULD KNOW HERE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE

DATE

By signing this questionnaire, I understand that Roland Realty does not guarantee all, if any, preferences will be accommodated.