



HOUSING QUESTIONNAIRE

Please return in enclosed envelope as soon as possible.

Office Use Only

Dorm: _____

Date: _____

ALL STUDENTS PLEASE FILL OUT PAGE 1 COMPLETELY.

STUDENT NAME				STUDENT #					
ADDRESS									
CITY				STATE			ZIP		
TELEPHONE #				AGE			GENDER	<input type="checkbox"/> Male	<input type="checkbox"/> Female

DO YOU REQUIRE ON-CAMPUS HOUSING Yes No

PLEASE CHECK YOUR START TERM Fall Winter Spring Summer

HOUSING PREFERENCE: PLEASE RANK IN ORDER OF PREFERENCE Sherwood Park Racers Village

EMERGENCY CONTACT INFORMATION IS RECOMMENDED FOR ALL STUDENTS LIVING IN ON-CAMPUS HOUSING. IF YOU ARE 17 YEARS OF AGE OR YOUNGER, THIS INFORMATION IS REQUIRED.

IN CASE OF EMERGENCY, CALL:

NAME				RELATIONSHIP			
CELLPHONE #							
HOME PHONE #							
WORK PHONE #							

PLEASE RETURN TO: The University of Northwestern Ohio
 Attn: New Student Services
 1441 N. Cable Road
 Lima, OH 45805

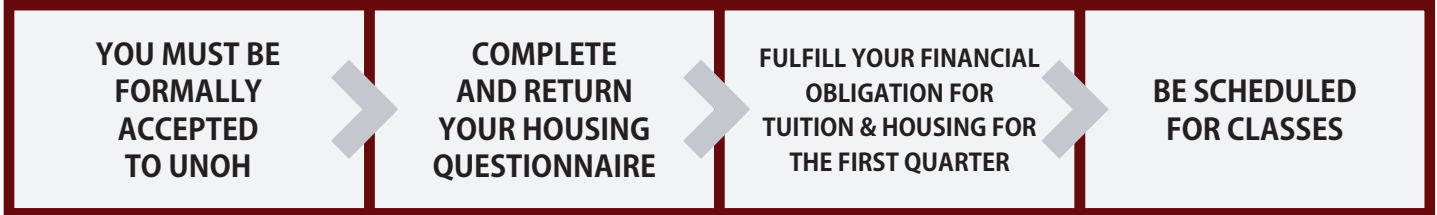
FOR STUDENTS PLANNING TO LIVE ON-CAMPUS PLEASE FILL OUT PAGE 2

ROOMMATE INFORMATION

PLEASE READ CAREFULLY

To secure on-campus housing, you must submit a non-refundable \$100 housing application fee to be applied toward the first housing bill. If paying by check, please make it payable to: The University of Northwestern Ohio.

YOU MUST COMPLETE THE FOLLOWING CONDITIONS TO BE CONSIDERED FOR UNIVERSITY HOUSING:



If these conditions are not met, you will not be eligible to be scheduled for University Housing

INITIAL ACKNOWLEDGMENT _____

If you wish to room with a friend, please request each other by writing their first and last name and student number on the lines to the right.

Both students must be conditionally accepted to the university, submit their Housing Questionnaire, pay the \$100 Housing Application Fee and have an academic schedule to be placed together in housing. This part does not guarantee that your request will be granted.

NAME OF PERSON YOU'D LIKE TO ROOM WITH _____

THEIR STUDENT ID # _____

This part allows us to best match you up with someone who shares common interests or a similar schedule. It is in your best interest to answer these questions honestly and truthfully so that we may create the best housing experience for you as possible.

I am a:	<input type="checkbox"/> Non-Smoker	<input type="checkbox"/> Smoker	<input type="checkbox"/> Occasional Smoker	
I go to bed at:	<input type="checkbox"/> 10-11PM	<input type="checkbox"/> 12-1AM	<input type="checkbox"/> 2AM or later	
I am more active:	<input type="checkbox"/> in the morning	<input type="checkbox"/> in the evening		
I would describe myself as:	<input type="checkbox"/> very neat	<input type="checkbox"/> usually neat	<input type="checkbox"/> messy	
I would describe myself as:	<input type="checkbox"/> very quiet	<input type="checkbox"/> fairly quiet	<input type="checkbox"/> social	<input type="checkbox"/> very social
Do you have any allergies?	_____			
What types of music do you enjoy:	<input type="checkbox"/> Alternative	<input type="checkbox"/> Classic Rock	<input type="checkbox"/> Country	<input type="checkbox"/> Jazz/R&B
	<input type="checkbox"/> Dance/Hip Hop/Rap	<input type="checkbox"/> Pop/Top 40	<input type="checkbox"/> Hard Rock/Metal	<input type="checkbox"/> Classical
I am:	<input type="checkbox"/> National Guard	<input type="checkbox"/> Reservist	<input type="checkbox"/> Veteran	<input type="checkbox"/> Not Applicable
I am interested in participating in the following:	<input type="checkbox"/> Student Clubs	<input type="checkbox"/> Residential Life	<input type="checkbox"/> Auto Clubs	<input type="checkbox"/> Intramural Sports

Student Signature: _____ Date: _____