BUILDING: _____
APARTMENT: _____
DATE: _____

ROOMMATE AGREEMENT

Communication is important for roommates to share space peacefully. Take some time to think about your values, preferences, needs, and expectations. Discuss each section below to learn about your roommates and their expectations. This may help you avoid conflicts and unnecessary stress later in the semester.

ROOMMATE 1:
ROOMMATE 2:
ROOMMATE 3:
ROOMMATE 4:
ROOMMATE 5:

BREAKING THE ICE

Have you ever shared a room?

Our shared hobbies and interests:

The things we each value:

Our lifestyle choices include
(ex: vegetarian, prayers, exercise etc.):

STUDYING

Our preferences for studying include:
(Studying with the TV on? with music? in silence?)

Where do we do most of our studying?

SECURITY

When will we lock the room?

When are guests allowed?

SHARING BELONGINGS

What are your preferences and expectations for sharing?

Appliances *(microwave, coffee maker, etc)*	YES _____ NO _____ ASK _____
Cell Phone	YES _____ NO _____ ASK _____
Chargers	YES _____ NO _____ ASK _____
Clothes	YES _____ NO _____ ASK _____
Food	YES _____ NO _____ ASK _____
Furniture	YES _____ NO _____ ASK _____
Laptop / Tablet	YES _____ NO _____ ASK _____
Personal Care / Hygiene Products	YES _____ NO _____ ASK _____
TV / Console	YES _____ NO _____ ASK _____
Other Items	YES _____ NO _____ ASK _____

Things my roommates don't like.... (dirty dishes, loud music, etc)

SLEEPING

At what times does the room need to be quiet?
On weekdays? _____ On weekends? _____

What does quiet mean to each of you?
(Music, TV, computer noise, talking, phone calls, etc.)

Can any lights be on when a roommate is asleep?

What is okay to do in the morning while a roommate is still sleeping? *(Music, dryer, etc.)*

Most weeknights, each of us expects to go to sleep by this time:

Most weekdays, each of us expects to wake up at this time:

VISITORS

Are daytime guests acceptable? ___YES ___NO

How many guests at a time are okay?
For what purpose?
___Studying
___Socializing?

Are overnight guests acceptable? ___YES ___NO
(What if they are the opposite sex?)

All non-residents must sign-in with Safety first
Overnight Guest Forms go to Safety 24 hours prior to arrival.

Other Ideas & Agreements

Cleaning Preferences & Expectations

Cleaning	How often?	How do you know whose turn it is? *(Chore Chart; Each person cleans for themselves; we'll talk as needed;, etc.)*
Trash	___Daily ___Weekly ___Monthly	
Dishes	___Daily ___Weekly ___Monthly	
Laundry	___Daily ___Weekly ___Monthly	
Kitchen	___Daily ___Weekly ___Monthly	
Bathroom	___Daily ___Weekly ___Monthly	
Preferred Room Conditions		
Common Room	___ Very Clean ___ Some stuff ok ___ Don't care	
Bedroom	___ Very Clean ___ Some stuff ok ___ Don't care	
Bathroom	___ Very Clean ___ Some stuff ok ___ Don't care	
Kitchen	___ Very Clean ___ Some stuff ok ___ Don't care	

CONFLICT

How will communicate a concern or issue?
(confront it right away, write a note, ask the RA for advice, etc.)

What causes you stress?

How do you express it?

How can your roommate help you avoid stress?