

**GEORGIAN COURT UNIVERSITY
RESIDENT INFORMATION FORM**

Name: _____ **Date of Birth:** _____

Address: _____
(Street) (Apartment)

(City) (State) (Zip Code)

Phone: _____ **Facebook:** _____
(Student CELL Phone)

Email Address: _____

US Citizen: yes no **If not, country of citizenship:** _____

Class Level for Fall 20__ Term:

Freshman Sophomore Junior Senior Transfer Other: _____

We will share your name and the following preferred contact information with your roommate:

- Address Phone Email Facebook Profile

ROOMMATE PREFERENCES:

Providing the following information will help us with your housing assignment

Check the answers that best describe you:

1. **How concerned are you with keeping your room neat and orderly?**
 I like it neat My room is always a mess Other: _____
2. **What environment best describes your study habits?**
 I study in complete silence. I study with music/TV.
3. **All residence halls at GCU are non-smoking. However, students may smoke outside.**
 I prefer a non-smoking roommate. I prefer a smoking roommate.
4. **Do you enjoy having visitors in the room?**
 I enjoy visitors in my room. I prefer few visitors.
5. **I would describe my schedule on weekdays as:**
 "Normal" schedule-to sleep by 12AM. Night person-go to bed later than normal.
6. **Check the music you like the most.**
 Alternative Pop Country Rap Classic Rock R&B Classical Hip-Hop
7. **Floor preference (First come first serve basis)**
 1st Floor 2nd Floor 3rd Floor
8. **I am interested in living/participating in the following living learning community?**
 International Cultures & Gateway to the Arts Outdoors Adventures & Sustainability
9. **Is there someone in particular with whom you are interested in living?**
