

**GEORGIAN COURT UNIVERSITY
RESIDENT INFORMATION FORM**

Contact Information

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

Address: _____
(Street) (Apartment)

(City) (State) (Zip Code)

Phone: _____
(Home) (Cell)

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

Class Level for Fall 2010 Term:

Freshman Sophomore Junior Senior Transfer Other: _____

Meal Plan Selected: Five Day Seven Day

I give permission for GCU to provide my contact information to my roommate:

Yes No

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.

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 Top 40 Country Rap Classic Rock R&B Classical Hip-Hop

7. Floor preference

1st Floor 2nd Floor 3rd Floor

8. I am interested in living/participating in the following living learning community?

Gateway to the Arts International Cultures Outdoor Adventures

9. Is there someone in particular with whom you are interested in living?
