

# Exchange Student Housing Placement Information

This form will be used by the student affairs office for the express purpose of matching roommates with similar lifestyles. This form will be kept on file throughout your time as a student at the College. You may change your preference at any time by contacting the Housing Office.

*Please Print Clearly*

Student Name: \_\_\_\_\_  
First
Middle
Last

Preferred Name: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

Email Address: \_\_\_\_\_

Country or Exchange University: \_\_\_\_\_ Native Language: \_\_\_\_\_

Please indicate all physical, medical, and psychological considerations that might impact your room placement AND list medications taken on a regular or daily basis (*i.e. physical disability, severe allergies, etc.*).

**Medication**

**Purpose**



- Do you smoke? \_\_\_Yes \_\_\_ No \_\_\_ Occasionally, but I would not consider myself a smoker.  
 Do you object to a roommate who smokes? \_\_\_ Yes \_\_\_ No  
*\*Please note that all residence halls are completely non-smoking.*
- How do you like to keep your living space? This includes both your room and the bathroom.  
 \_\_\_ Neat and tidy \_\_\_ Average/lived-in \_\_\_ Somewhat messy \_\_\_ Very messy
- When do you typically go to bed? \_\_\_ Before 10pm \_\_\_ 10pm-midnight \_\_\_ After midnight
- When do you typically wake up? \_\_\_ Before 8am \_\_\_ 8am – 10am \_\_\_ 10am – noon \_\_\_ After noon
- Where would you do most of your studying? \_\_\_ In your room \_\_\_ Library \_\_\_ Study Room
- How you play your music: \_\_\_ Low \_\_\_ Moderate \_\_\_ Loud
- The College does not condone the use of alcohol when in violation of federal and state laws and College policies. How would you characterize your attitude toward alcohol consumption in your room?  
 \_\_\_ Alcohol free \_\_\_ Once in a while \_\_\_ Moderate consumption \_\_\_ Heavy consumption

Briefly describe yourself (*include hobbies or extracurricular activities you are interested in*). Please include any information about you not asked on this form that will assist us in pairing you with a roommate. If you need more room, please feel free to use the back of this form.

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| <p><b>While you are not required to provide information about your own gender identity, gender expression or biological sex, this information may be helpful in placing you with a compatible roommate.</b></p> | <p>Gender-neutral housing provides a living environment where student housing is not restricted to traditional limitations imposed by gender and/or sex definitions. This option is ideal for students whose gender expression, gender identity and/or biological sex varies from the standard paradigm and for students who believe that their gender and/or biological sex should not be limiting factors in roommate decisions. Pitzer students are not restricted to selecting a roommate based on biological sex.</p> |
| <p><b>What is your personal gender identity?</b><br/>         ___ Woman ___ Man ___ Prefer Not to State<br/>         ___ Other Gender Identity please specify _____</p>   | <p><b>You prefer that your roommate's gender identity is:</b> (Select all that apply)<br/>         ___ Woman ___ Man ___ No Preference<br/>         ___ Other Gender Identity please specify _____</p>   |
| <p><b>What is your biological sex?</b><br/>         ___ Female ___ Male ___ Intersex ___ Prefer Not to State</p>  | <p><b>You prefer that your roommate's biological sex is:</b> (Select all that apply)<br/>         ___ Female ___ Male ___ Intersex ___ No Preference</p>   |

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| <p><b>For Office Use Only:</b> Residence Hall _____ Resident Assistant: _____ Mentor: _____</p> |
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