ROOMMATE(S)/SUITEMATE(S) CONTRACT AGREEMENT

The Agreement must be turned in to your RA within 2 weeks of the beginning of the school year or within 48 hours of any room change. No visitors are allowed until this form is completed.

Our room will be kept:
□ Neat
□ In between
□ Messy

We will clean our room:
□ Daily
□ Weekly
□ Monthly
□ As Needed: __________

In maintaining a clean and neat room/suite we will do the following:
□ Do laundry before basket overflows
□ Wash dishes after using them
□ Take out trash/recycling once a week
□ Vacuum/Dust weekly
□ Make beds daily

When roommate/suitemate is sleeping it is OK or NOT OK to:

Watch TV
Listen to music
With headphones
Without headphones
Use hair dryer
Have guests over
Have overhead lights on
Have desk lamp on

We plan to go to bed between ______am/pm & ______am/pm.
We plan to get up between ______am/pm & ______am/pm.

When one of us is studying in the room/suite, we are OK with:

□ Complete quiet
□ Low music/headphones
□ Television

When studying with others in the room/suite, the other roommate(s)/suitemate(s) agrees to:

□ Not be in the room
□ Remain in the room, but be quiet
□ Other: ________________

Using the following personal belongings is OK or NOT OK:

Television
Stereo
Microwave
Refrigerator
Food/Drink
Computer
Game System
Clothes
Personal Items

**After using the above items, return them to their original condition, unless food/drink.**

We will lock the room/suite when:
□ down the hall
□ showering/in bathroom
□ eating
□ at night
□ ________________

Arrangements for overnight guests of the same sex should be made ______ days/weeks in advance.

Guests in our room are allowed to:

□ Sit/use other’s bed
□ Eat other’s food
□ use other’s personal belongings
□ use other’s computer
□ ________________

If my roommate(s)/suitemate(s) have any concerns with the rights and agreements stated above or regarding over living relationship, we will . . .

1. Talk with each other and try to work the problem out between ourselves.
2. Consult our RA to work with us on a resolution of problem.
3. Consult our Hall Director to talk over our opinions

We the undersigned, agree to the above stated rights and behavioral decisions. Additionally, we agree that specific stipulations may be adjusted by the mutual agreement of all roommates/suitemates. A copy of the agreement will be kept on file.

__________________________________________
Signature of Resident/Date

__________________________________________
Signature of Resident/Date

__________________________________________
Signature of Resident/Date

__________________________________________
Signature of Resident/Date

__________________________________________
Signature of Resident/Date

__________________________________________
Signature of Residence Life Staff/Date

Revised: 08-10-09