



ROOMMATE AGREEMENT

Roommate Names: 1. _____ 2. _____ 3. _____ 4. _____

Hall and Room Number: _____

Date: _____

ROOM CONDITION & SAFETY

In maintaining a clean and neat room, we will do the following (check/complete all that apply):

- Trash/Recycling:** How Often? By Whom: Rotate
Vacuum/Dust: How Often? By Whom: Rotate
Make our Beds: How Often? By Whom: Rotate
Wash Dishes: How Often? By Whom: Rotate
Wash Laundry: How Often? By Whom: Rotate

We agree that our room should be (check/complete all that apply):

- Locked at all times
 Unlocked when one of us is inside the room
 Other: _____

We prefer the windows to be (check/complete all that apply):

- Open Depends on the weather
 Closed Depends on the time of day
 No preference If depends, please elaborate: _____

During the day, we agree the room temperature should be: _____

During the evening, we agree the room temperature should be: _____

SLEEPING & OTHER RESTFUL STATES

I can't sleep if the following things are happening in the room (check all that apply):

- | | | | | | | | |
|--------------------|--|--------------------|--|--------------------|--|--------------------|--|
| Roommate #1 | <input type="checkbox"/> Guest in the room | Roommate #2 | <input type="checkbox"/> Guest in the room | Roommate #3 | <input type="checkbox"/> Guest in the room | Roommate #4 | <input type="checkbox"/> Guest in the room |
| | <input type="checkbox"/> Television is on |
| | <input type="checkbox"/> Lights are on |
| | <input type="checkbox"/> Phone is being used |
| | <input type="checkbox"/> Music is playing |
| | <input type="checkbox"/> Video chat/Skype |
| | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> |

I typically go to sleep around _____ am/pm:

- Roommate #1:** _____
Roommate #2: _____
Roommate #3: _____
Roommate #4: _____

On average I try to sleep _____ hours per night:

- Roommate #1:** _____
Roommate #2: _____
Roommate #3: _____
Roommate #4: _____

GUEST POLICY:

No more than 7 people will be allowed in a room at any one time. Residents are responsible for their guests. Overnight guests may not stay more than 3 consecutive nights. Consult the Policies & Procedures to learn more information at: <http://bluetoad.com/publication/?i=320179>

GUESTS

We allow overnight guests:

- Only after notification of ____ day(s)
 In my absence
 Never

Overnight guests can be:

- Same gender only
 Any gender

I am _____ with my roommate engaging in intimate and/or sexual activities in our room.

- #1:** Okay Okay, in my absence Not okay
#2: Okay Okay, in my absence Not okay
#3: Okay Okay, in my absence Not okay
#4: Okay Okay, in my absence Not okay

I would prefer guests do not _____:

- #1:** Sleep on my bed Sit on my bed Eat my food Use my computer Use my other belongings Other:
#2: Sleep on my bed Sit on my bed Eat my food Use my computer Use my other belongings Other:
#3: Sleep on my bed Sit on my bed Eat my food Use my computer Use my other belongings Other:
#4: Sleep on my bed Sit on my bed Eat my food Use my computer Use my other belongings Other:

ROOM DECORATION POLICY:

Furniture should not be placed in a manner that obstructs the door from opening. Items should not be affixed from the ceiling. Empty alcoholic beverage containers are not permitted as decoration. Consult the Policies & Procedures to learn more information at:
<http://bluetoad.com/publication/?i=320179>

We will decide on room decoration(s) by (discussing first, divide room up, etc.):

ACADEMICS

I prefer to study:

Roommate #1	Roommate #2	Roommate #3	Roommate #4
<input type="checkbox"/> In my room			
<input type="checkbox"/> In the study lounge			
<input type="checkbox"/> In the library			
<input type="checkbox"/> Elsewhere on campus			
<input type="checkbox"/> Off campus			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

When I'm studying in my room, I get stressed/distracted when the following are occurring (check all that apply):

Roommate #1	Roommate #2	Roommate #3	Roommate #4
<input type="checkbox"/> Guests in the room			
<input type="checkbox"/> Television is on			
<input type="checkbox"/> Phone/Video Chat			
<input type="checkbox"/> Stereo/Music	<input type="checkbox"/> Stereo/Music	<input type="checkbox"/> Stereo/Music	<input type="checkbox"/> Stereo/Music
<input type="checkbox"/> Open Window			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TO SHARE OR NOT TO SHARE?

It's okay if my roommate borrows/uses my ("W"= With permission, "A"= Always, "N"=Never):

Roommate #1	<input type="checkbox"/> Television <input type="checkbox"/> Computer/Tablet <input type="checkbox"/> Stereo, iPod, etc. <input type="checkbox"/> School Supplies <input type="checkbox"/> Clothes <input type="checkbox"/> Toiletries		<input type="checkbox"/> Food/Drink <input type="checkbox"/> Printer <input type="checkbox"/> Camera <input type="checkbox"/> Other Electronics <input type="checkbox"/> Water Jug <input type="checkbox"/>
Roommate #2	<input type="checkbox"/> Television <input type="checkbox"/> Computer/Tablet <input type="checkbox"/> Stereo, iPod, etc. <input type="checkbox"/> School Supplies <input type="checkbox"/> Clothes <input type="checkbox"/> Toiletries		<input type="checkbox"/> Food/Drink <input type="checkbox"/> Printer <input type="checkbox"/> Camera <input type="checkbox"/> Other Electronics <input type="checkbox"/> Water Jug <input type="checkbox"/>
Roommate #3	<input type="checkbox"/> Television <input type="checkbox"/> Computer/Tablet <input type="checkbox"/> Stereo, iPod, etc. <input type="checkbox"/> School Supplies <input type="checkbox"/> Clothes <input type="checkbox"/> Toiletries		<input type="checkbox"/> Food/Drink <input type="checkbox"/> Printer <input type="checkbox"/> Camera <input type="checkbox"/> Other Electronics <input type="checkbox"/> Water Jug <input type="checkbox"/>
Roommate #4	<input type="checkbox"/> Television <input type="checkbox"/> Computer/Tablet <input type="checkbox"/> Stereo, iPod, etc. <input type="checkbox"/> School Supplies <input type="checkbox"/> Clothes <input type="checkbox"/> Toiletries		<input type="checkbox"/> Food/Drink <input type="checkbox"/> Printer <input type="checkbox"/> Camera <input type="checkbox"/> Other Electronics <input type="checkbox"/> Water Jug <input type="checkbox"/>

ALCOHOL & OTHER DRUGS

We know that individual choices around alcohol and drug use sometimes cause roommate conflicts. Sometimes these conflicts arise over storing or using alcohol and/or other drugs in the room and sometimes these conflicts are due to inconsiderate behavior when students return to the room under the influence. Keeping in mind University Housing policy and state law, we encourage you to have an honest conversation with your roommate about your expectations for behavior in your shared space related to these matters. Being under the influence of alcohol and/or other drugs is no excuse for disrespectful behavior towards your roommate or for creating an unsafe situation in your room. Please know that Housing staff will document all alcohol and/or other drug violations which we observe and that both room owners can be held accountable for policy violations in the shared room.

ALCOHOL & DRUG POLICY REVIEW:

Alcohol is not permitted in rooms where both residents are under the age of 21. This includes alcohol brought in by guests over the age of 21. Rooms where 1 roommate is over the age of 21 should refer to the Policies & Procedures for Hall Living for more information. Games generally associated with over-consumption of alcohol are not permitted. Marijuana and other illegal drugs are also not permitted in University Residence Halls even with a prescription. Consult the Policies & Procedures to learn more information at: <http://bluetoad.com/publication/?i=320179>

COMMUNICATION

We prefer phone/video calls to be taken: In the room Not in the room In the room with headphones

Your voice is powerful! Allowing others, including parents, to advocate for you in a conflict does not mean the conflict is resolved or over. You are your own best advocate in these situations. Please note that the best way to resolve conflict is by speaking face to face. Notes on white boards, social media tools, texts, delivery via friends, etc. are not recommended means to resolve conflict.

Roommate #1: If I have a conflict with my roommate(s), I will communicate by: _____

Roommate #2: If I have a conflict with my roommate(s), I will communicate by: _____

Roommate #3: If I have a conflict with my roommate(s), I will communicate by: _____

Roommate #4: If I have a conflict with my roommate(s), I will communicate by: _____

YOU DESERVE RESPECT

Policies and procedures are established to assist in shaping the Residence Hall environment to protect your rights, and to define your responsibilities to others. You are expected to abide by local, state and federal laws, the University's Non-Discrimination and Anti-Harassment Policy and Policies and Procedures for Hall Living

<http://policy.arizona.edu/human-resources/nondiscrimination-and-anti-harassment-policy>

SIGNATURES-FALL SEMESTER

I agree that I have reviewed our roommate agreement and will abide by the established guidelines.

Roommate #1: _____

Roommate #2: _____

Roommate #3: _____

Roommate #4: _____

Resident Assistant: _____

SIGNATURES-SPRING SEMESTER

I agree that I have reviewed our roommate agreement and will abide by the established guidelines.

Roommate #1: _____

Roommate #2: _____

Roommate #3: _____

Roommate #4: _____

Resident Assistant: _____