



Resident Hall Questionnaire

In order for us to better serve you, please complete the following form and return to the Office of Student Development by December 15th, 2011.

GENERAL INFORMATION

Name: LAST FIRST MIDDLE Preferred Name:

Present Address: CITY STATE ZIP

Permanent Address: CITY STATE ZIP

Phone Number: Cell Number:

E-mail:

Age: Birthday: Gender: Male Female

Please Check One: Both Deposits Paid Tuition Deposit Enclosed Room Deposit Enclosed

CLASSIFICATION

- New Freshman
Transfer
Re-Admission

ATTENDANCE

- Part Time
Full Time

TRACK

- Counseling Pastoral Youth
Elementary Ed. Worship General
Management & Ethics Missions Psychology

ROOMMATE REQUEST

NOTE: Preferences must be mutually requested by both students. Assignments are given after deposit & questionnaire are received.

1st Preference: 2nd Preference:

PERSONAL PREFERENCES (Please check all that apply)

Favorite Music: (NO OFFENSIVE MUSIC PERMITTED)

- Alternative Country Jazz Rap
Classical Indie Oldies Top 40
Contemporary Christian Gospel R & B Other:

Interest in Extracurricular Activities:

- Student Government Missions Group - GCMF Music Group Poetry Group - D[tS]PS
Intramural Sports Drama Group - Imitators Other:

On average, You:

- Go to bed by: 10 p.m. 11 p.m. 12 p.m. 1 p.m. or later
Wake up by: 6 a.m. 7 a.m. 8 a.m. 9 a.m. or later
Describe your sleep as: Sound Average Light
Described yourself as: Extraverted Introverted Somewhere in-between
Describe your room as: Fairly Neat Fairly Messy Somewhere in-between
Prefer your room to be: Crowded Few People Your Roommate Only You
Require study areas that are: Quiet Fairly Quiet Some Noise Doesn't Matter

Favorite colors and decorating style:

Hobbies and Activities you participate in:

Please note: All returning students are assigned rooms first. New student room assignments are made according to date of receipt of deposit and completed resident hall questionnaire. No room assignments will be given until both are received.